

RN

A JOURNAL FOR NURSES

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December, 1956



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RN

A JOURNAL FOR NURSES

VOLUME XIX • NUMBER XII • DECEMBER 1956

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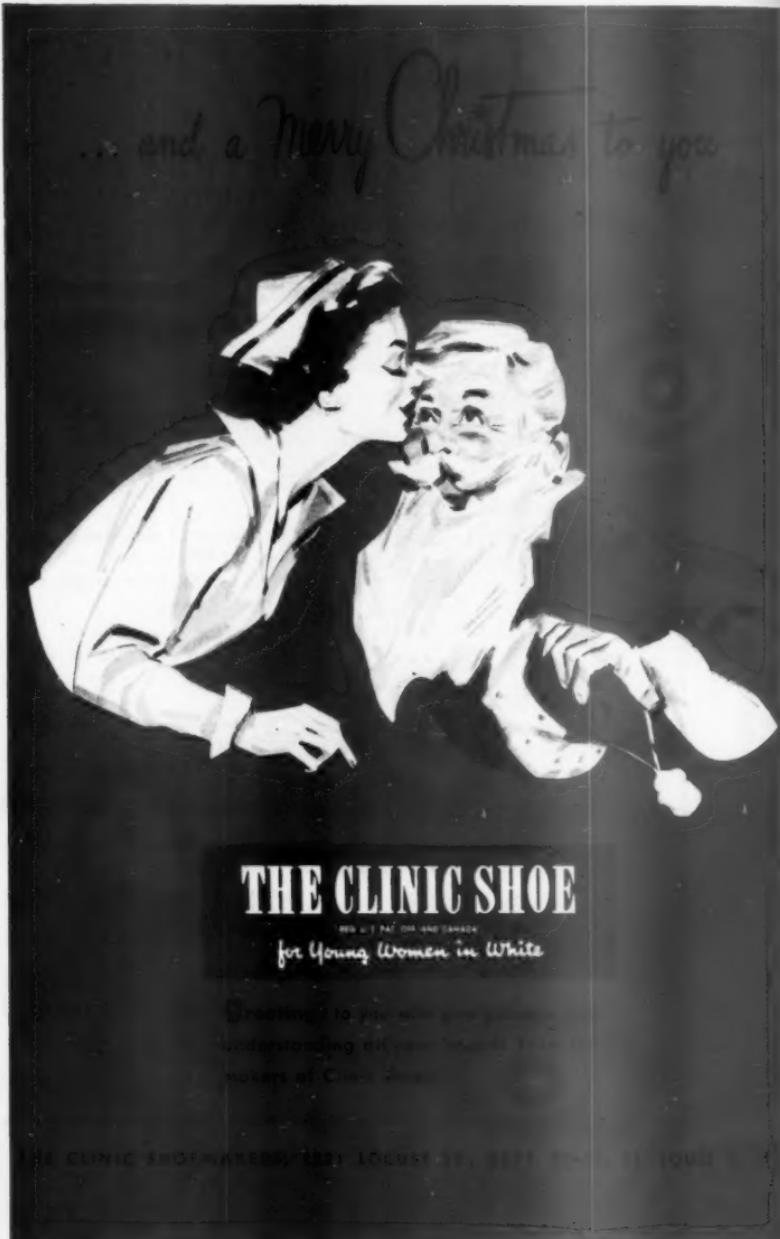
The story of New York City's successful program which teaches alcoholics the use of will power in overcoming chronic addiction.

BY MARION L. BRIGGS, R.N.

EPA

NBP

R.N. December 1956; Vol. 19, No. 12. Published monthly by The Nightingale Press, Inc., Oradell, New Jersey. Subscription \$2 a year; 25¢ a copy; Canada and foreign countries \$3 a year; address: R.N., Rutherford, New Jersey. Entered as second class matter, Nov. 20, 1951, at the post office at Rutherford, N.J. under the act of March 3, 1879. Copyright 1956, by The Nightingale Press, Incorporated.



...and a Merry Christmas to you

THE CLINIC SHOE

for Young Women in White

Greetings to you,

understanding and

makers of Clinic

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CREDITS: Cover-photographer, Walter Herstatt; cap and pin, Department of Nursing, University of Virginia, Charlottesville, Virginia; uniform, Tiffiny Uniform Company, New York, N.Y. Photographs—36 through 41, Saint Jean's Hospital, Bruges, Belgium; 63, National Broadcasting Company; Christmas card reproductions, 45 through 49, Pitman Publishing Corporation (for the original copyright owners). Poem, 43, reprinted with permission from *The New York Herald Tribune*.

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MANUSCRIPTS are always welcomed by the editors—particularly those written on nursing and allied subjects by interested authors. Manuscripts should be typed, with double or triple spacing. Send photographs and/or illustrations with manuscripts whenever possible. All published manuscripts become the property of R.N. Manuscripts not accepted will be returned to their authors.

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R.N.—a journal for nurses

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ABOUT



SINCE the School of Nursing at the University of Virginia was established in 1901, its high standards of education and service have allowed graduates to meet the ever-increasing demands of nursing.

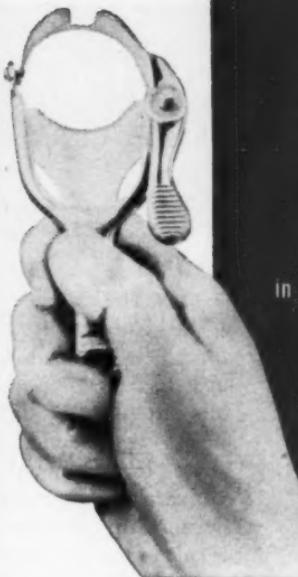
Its pin prominently displays the University's Rotunda, which was designed by Thomas Jefferson and is one of the best known American university buildings.

The alumnae association, started in 1916, has an enrollment of 1,400 members. Almost half of these are actively engaged in nursing.

The Department of Nursing administers two other programs under the jurisdiction of the Schools of Medicine and Education, and the University of Virginia Hospital. The Cabaniss Memorial School offers the B.S. degree in Nursing Education. Started in 1928 by an endowment of \$50,000 from the Graduate Nurses' Association of Virginia, it is named for Sadie Heath Cabaniss, Virginia's outstanding pioneer nurse.

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*Gardner, H. L., and Dukes, C. D.: Am. J. Obst. & Gynec. 69:962 (May) 1955.

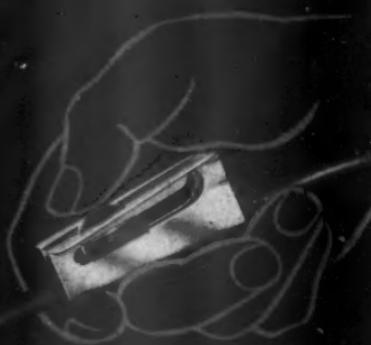
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1. Oberman, J. W., and Burke, F. G.: M. Ann. District of Columbia 23:482, 1954.

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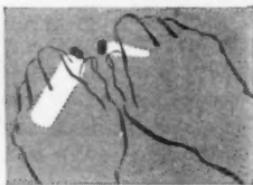
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DEBITS & CREDITS



PERSONAL PROBLEMS

Dear Editor:

Your September editorial, "Should They Walk Alone?" (re Nursing's No. 1 killer) and "Idea of the Month" (re better staff relationships) seem to answer and complement each other. That they appear in the same issue seems amazing coincidence!

I do not deny that discipline is essential if we are to have well-trained nurses. Yet all nurses know what I mean by *this*: Work at your top peak indefinitely and no one will notice you; but make one tiny error and you are under censure from the chief-of-staff to the dishwasher; and the error isn't soon forgotten.

The sad part is that the nurse carries her hospital discipline into her private life. On several occasions when young married nurses have confided their problems to me I have asked, "Are you unconsciously treating your husband as

you have been treated as a nurse?" I am happy to say that they have later reported their problems smoothed by a change in their own attitude. Reams have been written on how to get along with others; the basic idea is always to accentuate the other person's good points, and eventually the problem will clear itself.

We are sending young nurses into life with a terrific handicap if—without realizing it—they use hospital psychology, as used on them, in their relationships with other individuals.

R.N.
MILWAUKEE, WISC.

MUTUAL RESPECT

Dear Editor:

I am one of California's 10,000 licensed vocational nurses. In a recent issue of R.N., I came across letters to the editor concerning practical nurses and speaking of them in a derogatory way. If such

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Please send me, free, a generous trial supply of chewing-gum antacid, CHOOZ.

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letters indicate the way R.N.'s generally feel about practical nurses, is it any wonder that some of the latter seek employment where they won't be under R.N. supervision?

Fortunately, I have never worked with nurses who feel this way. I am under the supervision of wonderful R.N.'s who are willing to aid and teach at the same time. I respect them and they respect me as an L.V.N. I am grateful for what they have taught me and they, in turn, are pleased with the results.

(Mrs.) T. STANKEY, L.V.N.
SAN FRANCISCO, CALIF.

READY REFERENCE

Dear Editor:

We have found R.N. so helpful and so full of information which we use for reference that we would like to keep back issues available in our library. Do you have binders which hold the twelve yearly issues?

MARGARET M. BUTLER, R.N.
DIRECTOR
VISITING NURSE ASSOCIATION
WILMINGTON, DEL.

[Such binders are available at \$1.70 each from Nightingale Press, Inc., Oradell, N.J.—THE EDITORS]

STAFF RELATIONS

Dear Editor:

As a practical nurse, I take exception in many ways to Florence L. McQuillan's article, "The Physician's Role in the Practical Nurse Controversy" R.N., June 1956.) I have worked in the same [Continued on page 16]

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december, 1956

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DEBITS AND CREDITS

[Continued from page 12]

hospital for over ten years, and it has been my privilege to have enjoyed the full respect, understanding and friendship of all R.N.'s and doctors with whom I have worked.

Why, in a properly run hospital, would an unqualified nurse be left in charge of a 55-bed service? And why would a *verbal* order for administration of a narcotic be either given or taken? Wouldn't the blame be equally divided between the doctor who gave the order and the nurse who accepted it?

As to why some doctors prefer practical nurses: I can understand that from the attitude I have seen some nurses assume in resenting what they are asked to do; a little courtesy goes a long way.

Perhaps the time has come when we should all—R.N.'s and practical nurses alike—take stock of ourselves. Perhaps a revision of our codes of ethics would make for better understanding all around. I am sure that no practical nurse whose aim is to do a good job, would infringe on the rights of any R.N.

BERNICE J. BRUCH, L.P.N.
JERSEY CITY, N.J.

NOTES FROM NIPPON

Dear Editor:

My name is Tsutako Iimori and am a nurse in Japan. I have received many of your R.N. Although I cannot read all the pages completely, I try to read and en-

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joy it by using the dictionary. I find very interesting your R.N. I find interesting your country, hospitals, and nurses. I wish you the progress of your R.N.

TSUTAKO IIMORI

MATSUZAWA MENTAL HOSPITAL
TOKYO, JAPAN

* * *

Dear Editor:

We military dependents here in Nagoya have organized a registered nurses' group and have many interesting projects ahead. Would you kindly send several R.N. subscription forms? Many have asked me about your magazine and wish to subscribe.

Also, I would like to have some reprints of the "Disaster Symposium" published in your May

issue. These articles would be of great help to us in our efforts to organize for disaster nursing here in Nagoya.

May I tell you how much I enjoy R.N.? I read every word of it from cover to cover, including all the advertisements.

(Mrs.) MARGARET L. HAYES, R.N.
NAGOYA, JAPAN

OKINAWA CLUB

Dear Editor:

When I joined my husband on Okinawa late in '53, I was told that nurses were in great demand here. As a former Army nurse, I felt sure that my volunteer services would be welcomed at the Army hospital. But I was mistaken. And everywhere else I got the same



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Recommend
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Therapy



Vicks VapoRub's 7 volatile ingredients will enhance the soothing relief

When steam therapy is indicated for croupy coughs, bronchial congestion and laryngitis, suggest Vicks VapoRub as a logical additive. VapoRub's 7 volatilizing ingredients enhance the efficacy of the treatment by soothing the dry, irritated membranes, loosening the phlegm and restoring normal breathing. In steam, it works fast,

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answer: "Sorry, we can't use you."

In May '54, the R.N. Club of Okinawa was formed under the leadership of Mrs. Juanita Watterworth, public health nurse for the U.S. Civil Administration of the Ryukyu Islands. As a member, I have been able to do much worthwhile volunteer work.

The club's first project was to help with nursing in the native hospital. Now, its volunteer members—after taking Red Cross courses—are teaching classes in home care of the sick and mother-baby care. They also volunteer for disaster and epidemic duty. Last year, these R.N.'s gave more than 3,500 hours of voluntary service, including participation in Diabetic Detection Week, a flu vaccine round-up, the Salk vaccine program, and the spring and fall immunization of school children.

(Mrs.) HELEN S. PILLIVANT, R.N.
APO 331
SAN FRANCISCO, CALIF.

WORKING THEIR WAY . . .

Dear Editor:

Two young women came to my home recently, saying they wished to tell me about a "nursing plan." Upon admission, they informed me that they were senior students taking a five-year course at a school of nursing with which I am not acquainted. To obtain tuition money, they were selling magazine subscriptions.

I was shocked to think that nursing had reached the place where its students had to stoop to

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this type of thing to raise funds for their education. Is there not a place to which nursing students can go for a scholarship or loan if they need one?

I do not know whether these girls had the O.K. of their school; but surely no school of nursing worth its salt would condone such a thing. Think how this type of solicitation must lower the profession in the eyes of the public!

(Mrs.) **PHYLLIS SALTER, R.N.**
GLEN ELLYN, ILL.

CHRISTMAS-LIKE

Dear Editor:

Your Drug Digest Cards are like a Christmas gift—for they enable me to share my issues of **R.N.** with another nurse and still have on file the drug records as printed in the magazine.

MABEL L. STRANAHAN, R.N.
EAST LANSDOWNE, PA.

COURAGEOUS R.N.

Dear Editor:

I wish to congratulate you on the fine article in your September issue about Mrs. Boyle and her fight to have blind and sighted students integrated in a public school (**R.N.**, Sept. 1956). We could use more nurses like her. Too often a nurse who "sticks her neck out" in advocating a progressive program is labeled a troublemaker. Mrs. Boyle knows the true meaning of the pledge we all take and so few have the courage to heed.

(Mrs.) **PHYLLIS C. BARRINS, R.N.**
SAN MANUEL, ARIZ.

KNOX

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R.N.—*a journal for nurses*



LITERATURE & SAMPLES

HAND SAFETY IN THE KITCHEN: A new leaflet emphasizes care of the hands in performing ordinary kitchen tasks. These DO'S and DON'TS of hand safety will be of particular interest to nursing arts instructors, high school, public health and industrial nurses. BRISTOL-MYERS PRODUCTS DIVISION. L 1

EXAMINING TABLE: Nurses who are consulted about the selection of major equipment may be interested in a folder which describes and illustrates the Ritter Universal Table, for examination and treatment. RITTER CO., INC. L 2

HOUSEWIVES' ECZEMA: Eczema of the hands, commonly caused by soaps

and detergents, sometimes presents a discouraging problem. Clinical literature and a sample of Polysorb Hydrate are offered. E. FOUGERA & CO., INC. L 3

RELIEF FOR PARCHED LIPS: Fleet's Chap Stick is gratefully accepted by hospital patients, for use on parched, feverish lips. Samples are offered to nurses. CHAP STICK CO. L 4

VITAMINS: A new catalog has been issued by Hudson, the firm that supplies vitamins and vitamin-mineral combinations by mail. Sixty-three items are indexed and described. HUDSON VITAMIN PRODUCTS, INC. L 5

..... CIRCLE DESIRED ITEMS, CLIP COUPON, AND MAIL TO

READERS' SERVICE DEPT.
R.N.—A JOURNAL FOR NURSES
ORADELL, NEW JERSEY

December, 1956

Coupon void
after
February 28, 1957

Please send me information on the following items. . . .
 1 2 3 4 5

NAME _____ R.N. _____

STREET _____

CITY _____ ZONE _____ STATE _____

TYPE OF NURSING _____

(PLEASE PRINT OR TYPE)

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nurses

december, 1956

MISS PHOEBE

NO. 14 IN A SERIES



"He sprang to his sleigh, to his team gave a whistle,
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How many "you'll-never-get-me-in-a-wheel-chair" patients do you know who are needlessly wasting away in back bedrooms?

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The amazing E & J electric wheel chair that tops them all.

You can recommend EVEREST & JENNINGS folding wheel chairs with confidence. There's a helpful E & J dealer near you.

EVEREST & JENNINGS, INC. LOS ANGELES 23



How to cope with the calorie question

Tell your patients about new D-ZERTA PUDDINGS (*Chocolate, Vanilla and Butterscotch*). Made especially for weight watchers and for those who must cut down on carbohydrates.

These delicious puddings are sweet and satisfying—yet they contain only 54 calories in a serving. That's with skim milk. With whole milk count 94.

D-ZERTA GELATIN is another low-calorie dessert. *Only 12 calories* in a serving that costs just pennies. At grocery stores everywhere in the 6 famous Jell-O flavors.

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Made by the makers of Jell-O desserts—for those who must watch their sugar intake.





common cold...
or allergy

if he's coughing:

AMBENYL® EXPECTORANT

AMBENYL EXPECTORANT has achieved an outstanding record for cough relief because it is equally effective in coughs occurring with colds and in those where allergy may be a factor. Comprehensive formulation, AMBENYL EXPECTORANT includes selected demulcent and expectorant agents, plus Ambodryl,[®] for potent antihistaminic action, and Benadryl,[®] for antihistaminic-antispasmodic effect. These components promptly control frequency and severity of any uncomplicated cough because they: soothe irritated respiratory mucosa, make cough more productive, relax bronchial spasm, and relieve congestive symptoms.



AMBENYL EXPECTORANT contains in each fluidounce:

Ambodryl hydrochloride (triamterenehydrodamine hydrochloride, Parke-Davis)	24 mg.
Benadryl hydrochloride (isophenyldamine hydrochloride, Parke-Davis)	56 mg.
Dihydrocodeine bitartrate	1/8 gr.
Ammonium chloride	8 gr.
Potassium guaiacolsulfonate	8 gr.
Menthol	0.5
Alcohol	5%

Supplied in 16-ounce and 1-gallon bottles.

Dosage: Every three or four hours—adults, 1 to 2 teaspoonfuls; children, ½ to 1 teaspoonful.



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KLING Bandage has a unique crinkly texture that can't slip, can't slide. It's the neatest, most comfortable bandage made.

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Your cost \$7.95

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- BAND-AID® Butterfly Closures .1 box
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†This product has no connection whatever with American National Red Cross

*TRADE MARK



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Ovaltine adds zest and appeal to the unappetizing, uninteresting restricted menu. Its balanced pro-

tein, vitamin and mineral formula favors weight gain, increases resistance and helps combat the strains of today's living.

Ovaltine is equally tempting hot or cold. This refreshing beverage may be taken at mealtimes, during "break" periods, or as a sleep inducing nightcap. Because it reduces the curd tension of milk over 60%, Ovaltine is kind to sensitive stomachs.

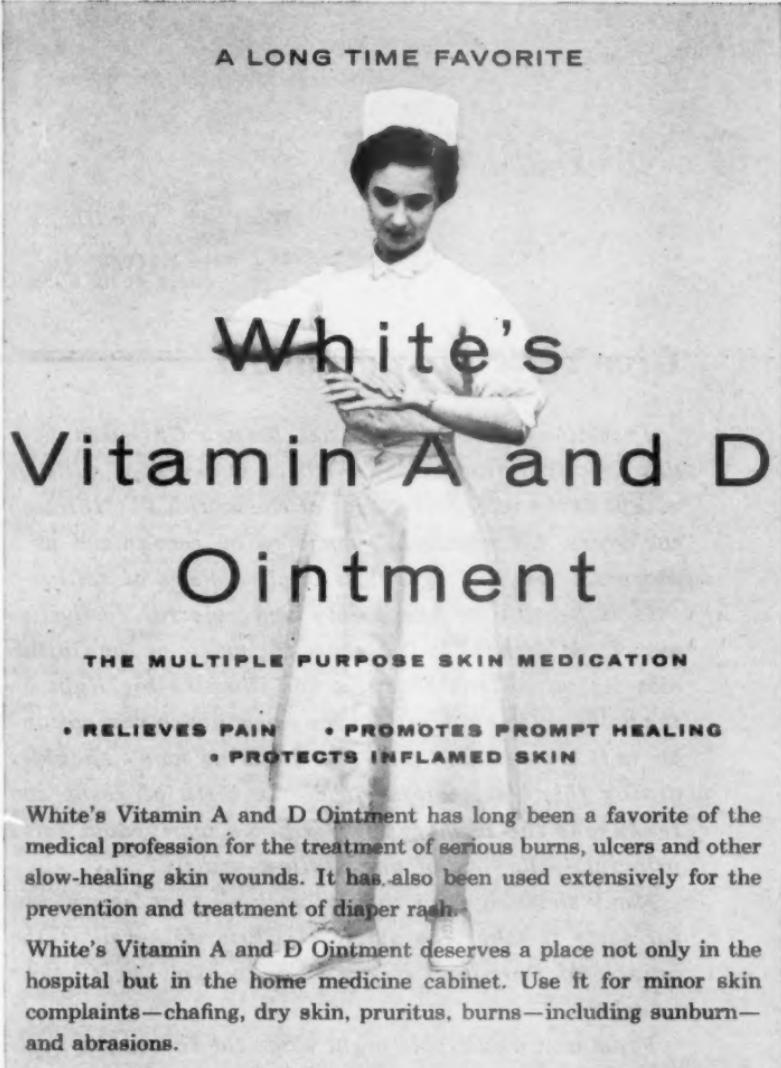
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A LONG TIME FAVORITE



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THE MULTIPLE PURPOSE SKIN MEDICATION

- RELIEVES PAIN • PROMOTES PROMPT HEALING
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White's Vitamin A and D Ointment has long been a favorite of the medical profession for the treatment of serious burns, ulcers and other slow-healing skin wounds. It has also been used extensively for the prevention and treatment of diaper rash.

White's Vitamin A and D Ointment deserves a place not only in the hospital but in the home medicine cabinet. Use it for minor skin complaints—chafing, dry skin, pruritus, burns—including sunburn—and abrasions.

Let us send you a sample as a starter.

SUPPLIED in 1½ and the economical 4-oz. tubes; 1 and 5 lb. jars.

WHITE LABORATORIES, INC.

Kenilworth, N. J.

If
Ye

What can I give Him,
Poor as I am
If I were a shepherd
I would bring a lamb,

Give gifts of your heart

Traditionally, Christmas has been a Christian holy day in celebration of the birth of One whom millions accept as the religious Savior of the world. Yet, through the years, Christmas has come to be recognized as a universal festival regardless of diversities of faith.

Is it because of the gaiety and colorful festivities associated with it? Is it because the magic of the Christmas season softens hearts, sheds illuminating light on the values men hold, gives eyes a new depth perception? Or is it because God puts His finger on man's shoulder during this commemoration of the birth of Jesus and reawakens the memory of His Son's martyrdom for a principle—the love of one's fellow man?

Many show signs of this memory all year 'round, but for some it takes the spirit of Christmas—call it the miracle of Christmas if you will—to open their hearts to others.

From that memorable night when the three, gift-bearing Wise Men made their journey across the plains of

EDITORIAL

*If I were a Wise Man
I would do my part—
Yet what can I give Him?
Give my heart.*
—Christina Rossetti

Judea with a single star to guide them, the giving of material gifts has been one expression of love for others. Yet, just to be loved is the greatest of all gifts. Someone once said that there is no surprise more magical than the surprise of being loved.

And so at Christmas when we try "to fit the long budget of fondness within the short budget of funds," let's wrap a separate package of a large portion of this love, tie it with bright ribbon, and tag it with instructions to open frequently throughout the year.

But, as this gift is delivered, let's remember that love means not only affection, it means respect, tolerance, understanding, consideration, and unselfish concern for others. It was for this kind of love that Jesus gave up His temporal life—to establish the firm foundation for all human relationships.

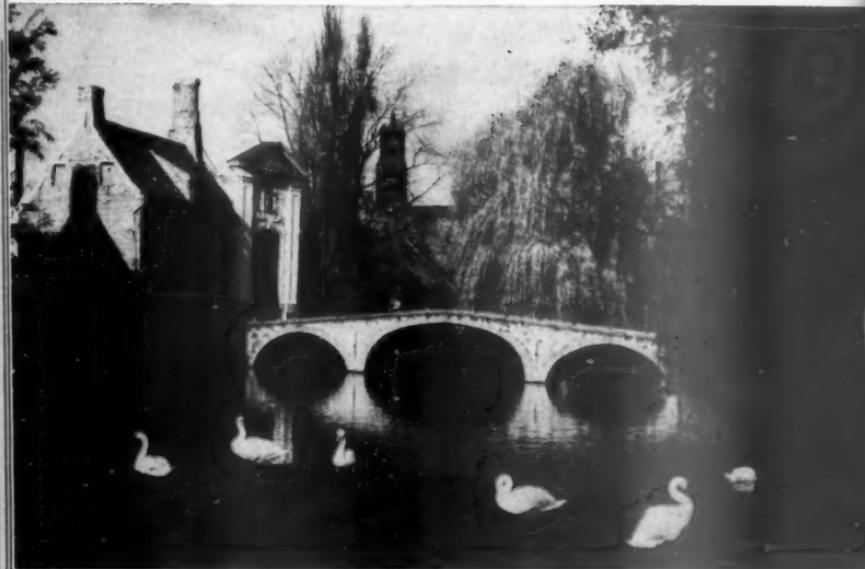
Help keep alive all through the year the memory of His martyrdom, which is, in reality, the magic of Christmas. This year give gifts of your heart.

—Alice R. Clarke, Editor

For 800 years, art and the solicitous care of the sick have been traditions at this Belgian hospital.

Saint Jean's of Bruges

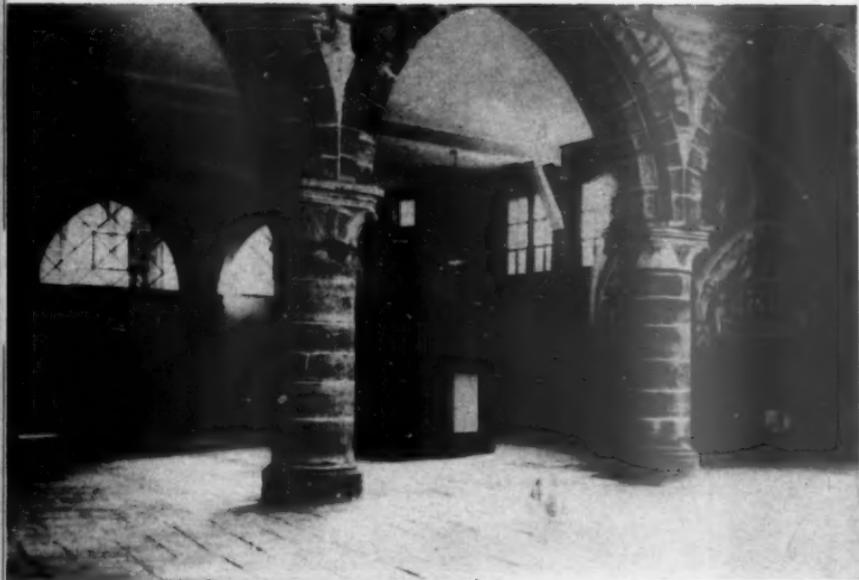
by Evelyn Pastore





BRUGES is a quiet town in Belgium where canals catch the picturesque reflection of step-gable roofs, arched bridges, and the angle and contour of a medieval place that has changed little in six centuries. It is a mecca for tourists, and one of its main attractions is Saint Jean's Hospital with its famed collection of paintings by Hans Memling, the fifteenth century master of the Flemish School.

Saint Jean's was founded in 1118 by monks and nuns of St. Augustine as a way station for travelers.



Some of the oldest buildings date from the thirteenth century. Most, though, were built in the past 100 years—but in the old Flemish style. Today, the 700-bed hospital has a large nurses' training school, a school for nurses' aides, and a school for midwifery. These, and the nurses' residence, built two years ago, are set amid spacious gardens.

As it has been for 800 years, the main concern at Saint Jean's is for the sick. Yet the hospital is unique because, in addition to its art collection, the

older buildings are preserved as a museum. There is the vaulted and pillared thirteenth century ward-room. Still used today is the old pharmacy with its elaborately carved chests, Cologne urns, old mortars, and its collection of pharmaceutical jars.

In one of the pharmacy rooms, Hans Memling painted the masterpieces that make Saint Jean's collection the envy of the world's art galleries. In 1475, the hospital commissioned him to paint various religious subjects for its chapel.





Today, six Memling canvases hang in the old stone-flagged chapter room in a corner of the hospital grounds where the flow of tourists cannot interfere with hospital routine. Two such works are *The Adoration of the Magi*, central panel of a triptych completed in 1480, and *The Virgin and the Apple*.





In many ways, the present is a reminder of the past at the hospital. The high, rounded forehead and the grave, sweet expression of the young nurse at right are typical of facial characteristics Memling placed on canvas centuries ago at Saint Jean's, where the solicitous care of the sick—and art—are both great traditions.





FIRST CHRISTMAS TREE

*Living on, a part of me,
Twig and bough and trunk and tree,
Evergreen of memory!*

The beaded strings of popcorn, strung
By Mama-ma and Mama, hung
From bough to bough; while here and there
An apple hung, or else a pear,
Or candy cane, or paper hat,
Or Tinker Bell, or Cheshire Cat,
Or red or blue or silver ball . . .
Affixed to every bough, a small
Metallic holder held in place
A tiny candle. Round its base
(A bucket filled with coal), the tree
Was ringed with toys for Sis and me
Which, somehow, in the winter night,
A Saint had brought. And oh, the sight,
When Christmas evening came, to see
That candle-lighted Christmas tree!

*Life exhibits little art
Tearing friend and friend apart;
Christmas trees are of the heart.*

Al Graham

◆◆◆ My Christmas Cards ◆◆◆

by Jo Brown

*My Christmas Cards
oh while I look
My store of pictured
treasures through,
As in the pages of a book
I read kind greetings,
sweet and true
And faces rise upon
the waves
Of mem'ry, that o'er
Time's dim sea
The treasures of its
nooks and caves
Are softly bringing
back to me—
And some are gay
and some are sad
Yet cannot bring me
thoughts of pain,
'Tis only memories
sweet and glad,
That Christmas cards
bring back again,
For all are fraught with
hope and love,
So may the card I
send to thee
In some hereafter
Christmas prove
A happy memory
of me.*

WHEN Christmas cards were first used a century ago, it was considered objectionably modern for families to spend Christmas Day away from home. The first card, produced in 1843, was the Victorian answer to the social visit.

Now deeply imbued with this tradition to greet relatives and friends at Christmas and wish them happiness in the coming year, we find it difficult to realize that this pleasant and convenient method was started not much more than 100 years ago.

Archeologists have discovered, though, that greetings were exchanged thousands of years ago. The Egyptians gave small symbolic presents in the form of little scent-flasks bearing inscriptions of good luck for the new year. And in



The First Christmas Card

ancient Rome it was customary to exchange greetings and presents on the first of January and to pay homage to the god, Janus, for whom the month was named.

With the advent of Christianity, pagan worship gave way to the celebration of the birth of Christ.

The Christmas spirit introduced a truly remarkable transformation.

Another prototype of the greeting card was the Japanese color print known as the Surinomo. This was probably exchanged as a New Year card. Suffice to say, the Surinomo was an approximation





of the more familiar European custom of the Christmas letter or special announcement. It exerted considerable influence on the design and marketing of the Christmas card.

Holly, ivy, and mistletoe are all part of the familiar seasonal decorations, which are not only admirable for their ornamentation but are happily nostalgic of such verse as this:

*"Fair mistletoe,
Love's opportunity.
What trees that grow
Give such sweet impunity."*

With such early origins, why didn't the Christmas card appear in its present form until the middle of the last century? One reason was the lack of printing

facilities for color and black-and-white mass reproduction. The card we know today was developed in the mid-Victorian era, when novel ideas were applied to the basic design every year.

The Victorians had a child-like taste for the animated, mechanical or movable card. Perhaps this reflects on their desire for flight from the discipline of their daily lives. Such cards capitalized on the surprise element. They were animated by a string, small pulley, or a lever. Young and old delighted in them.

The large Victorian family and the tradition which brought together several generations for the holiday festivities lends special emphasis to children. The portrait of the Victorian child as it appears on Christmas cards was particu-



R.N.—*a journal for nurses*

larly popularized by the artist, Kate Greenaway. Her genius for innocent little faces was apparent, and the sheer grace of childhood was especially well characterized. Of all Christmas card designers, she was the one whose name was long known to the public and identified with her work.

It is no exaggeration to say that, especially to the young, the most welcome of all representations was Santa Claus, also known as Father Christmas, King Wenceslaus, and Saint Nicholas. Whatever his name, his jolly face beneath his fur cap and hood, his bushy white eyebrows, mustache and beard, his costume and general appearance—as shown on the next page—show that he has not undergone too drastic a change in the century he has been featured on greeting cards.

Victorian Christmas cards also placed great emphasis on senti-



ment. And to the great majority of people, the chief attraction of cards is still the thought expressed. Relative to this, sound advice was recently offered by a greeting card publisher to any would-be yuletide poets:

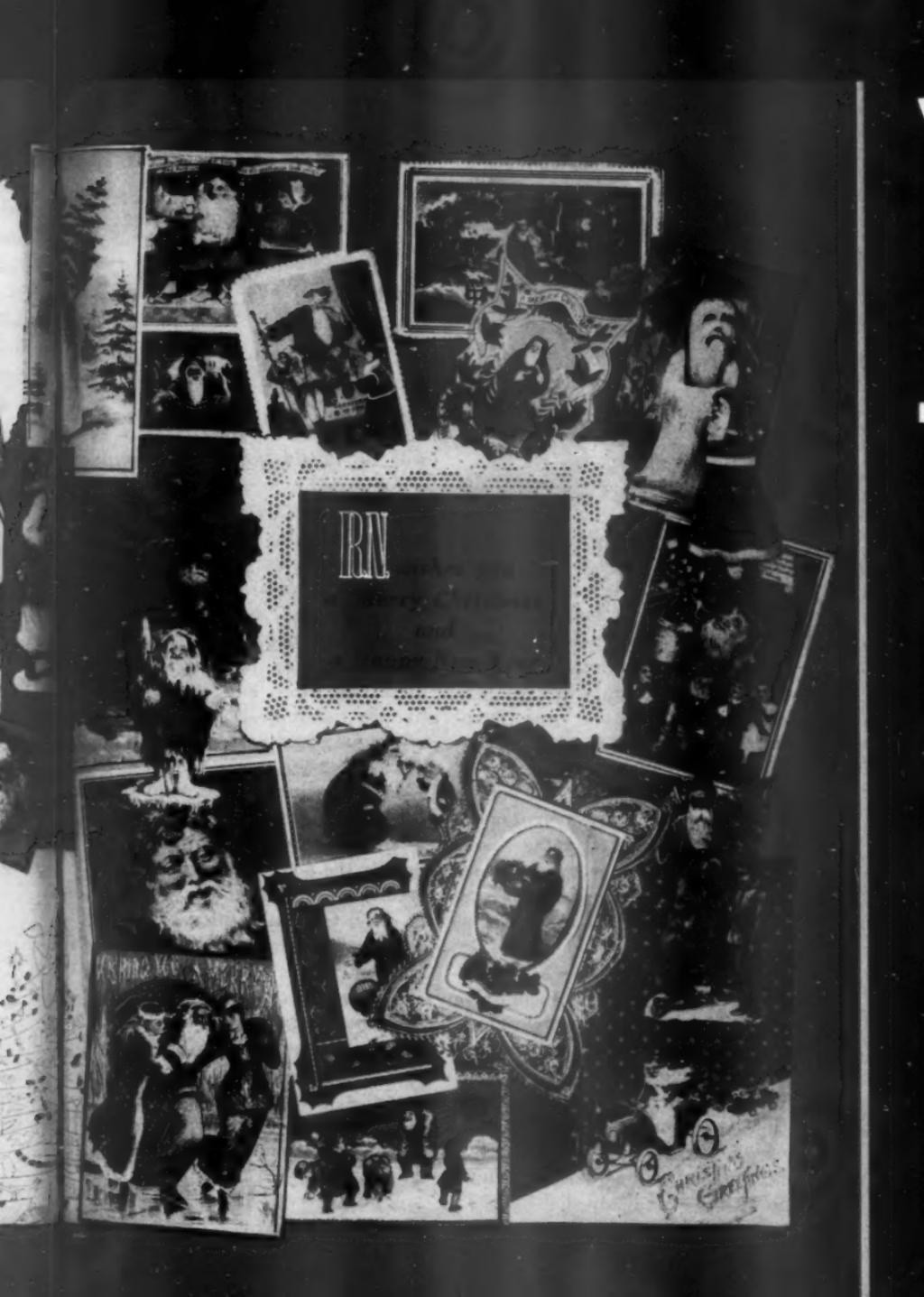
*"In fact, in writing greetings,
just say the things you'd say

In writing notes to those you
like to greet on Christmas day.

And don't be too poetical;
be simple as can be.

For those who buy the Christmas
cards are just like you and me."*







NEW DRUGS of '56

THE year 1956 will not be remembered for the advent of any new "miracle" drugs. With the possible exception of the oral anti-diabetic drugs now being clinically tested, nothing with the revolutionary significance of penicillin and cortisone was introduced into drug therapy during 1956.

Yet a number of new drugs developed this past year appear to possess definite advantages over older agents. Important advances have been made especially against some of the chronic diseases that afflict the minds and bodies of older people.

The significance of such gains in geriatric medicine is highlighted by statistics indicating that about one out of every twelve Americans is 65 or older. While our population has doubled since the turn of the century, the number of people over 65 has increased four-fold; and it is likely that by 1975 one out of every eight Americans

will be in this older age-group.

Among the most important of the new drugs introduced to combat the muscle, bone, joint, and nervous ailments that make these later years miserable for many were hormones, lissives or skeletal muscle relaxants, tranquilizers, and stimulants. Key facts concerning these new drugs and others effective in tuberculosis and diabetes are summarized here.

Tissue-Building Steroids

It has long been recognized that a falling off in sex steroid production by the gonads results in many mental and physical changes and in the deterioration of various organs and systems. Decline of gonadal function is often accompanied by nervousness, restlessness, irritability, and weight loss. Osteoporosis, a condition in which bone structure becomes markedly weakened, is common in both sexes after age 60, but occurs three times more frequently in women than in men.

While these physiological changes can often be corrected by adminis-

by Morton J. Rodman



tration of male and female sex hormones, the use of these substances is sometimes limited by undesirable side effects. Administration of androgens can cause masculinization, acne-like eruptions and growth of hair on the face, and an increase in libido; estrogens may cause uterine bleeding.

Attempts have been made to minimize the sexual effects of these hormones while maintaining their muscle and bone building properties. One approach has involved administration of estrogen-androgen combinations in ratios that cause adverse sexual actions to cancel each other out, yet without reducing the hormones' ability to stimulate the formation of protein, the material that makes up most muscle tissue and the framework within which calcium is laid down to form bone.

Although good results have been reported from mixtures of male and female sex hormones, some doctors assert that all too often such mixed medication may give a woman both facial hair-growth

and uterine bleeding. To avoid this, chemists have tried to modify the molecules of the two hormones, so as to eliminate their sexual effects while retaining their tissue-building action. A number of such "anabolic" steroids have been prepared; but while they proved capable of promoting nitrogen, phosphorus, and potassium retention in the ratio required for building protein, most still showed undesirable sexual effects.

An apparent exception is norethandrolone, marketed this year as Nilevar. According to recent reports, this steroid is very potent in its ability to reverse negative nitrogen balance, a condition caused by the destruction of body tissue at a rate greater than it can be replaced; at the same time, androgenic activity is said to be minimal compared to that of testosterone and the synthetic steroids previously prepared and studied.

The usefulness of a steroid of such specificity and potency has

not been limited to treatment of the elderly. On the contrary, administration of norethandrolone has also been employed at the opposite pole of life. Premature infants, who would probably have died despite all available dietary support, survived and gained weight, due to the growth-promoting and appetite-stimulating actions of this drug.

Norethandrolone also appears to be indicated in patients recovering from surgery, severe febrile illness, burns, fractures, and other traumatic injuries. All of these conditions have in common a marked increase in the rate of tissue-breakdown. This "catabolic" response to stress and injury, together with the local loss of tissue and reduced food intake, often results in considerable weight loss. Giving such patients this steroid appears to bring the disturbed protein metabolism back to its normal balance. Patients with tuberculosis, cancer, and other wasting diseases in which the body cannibalizes its own tissues to meet its energy demands, should also benefit from this drug, though it has no effect on the underlying infectious or neoplastic processes.

Ataraxics and Anti-Depressants

The search for chemicals capable of relieving the symptoms of mental disorders resulted in the introduction this year of a number of drugs, claimed to have advantages over reserpine and chlorpromazine. One of these, promazine (Sparine) is reported especially effective in the management of acute agitation.

It has been employed to reduce central excitation in acute schizophrenia, the manic phase of manic-depressive psychoses, delirium tremens, and withdrawal symptoms accompanying the treatment of drug addiction.

Promazine also calms senile psychotic patients, committed to mental institutions because their families could not cope with their personality disturbances. The tranquilizing effect makes treatment at home possible, relieving the burden on overcrowded mental hospitals, which can then concentrate their efforts on younger patients who benefit best from psychotherapy. Promazine is said to be free of such serious side effects as jaundice, liver damage, agranulocytosis, and the severe falls in blood pressure and parkinsonism-like symptoms reported with older ataraxics.

Another new drug for the treatment of disorientation and depression in some senile patients is methylphenidyl acetate (Ritalin). Under the influence of this psychomotor stimulant, old people suffering from lethargy, lack of interest in life, and defects in memory and judgment have been reported to be restored to near normal activity and vigor. Many such patients are able to return to their families and participate once more in community life. This drug, too, is said to have advantages over amphetamine and other well-known cerebral stimulants, mainly in its comparative freedom from undesirable blood pressure changes.

Another type of preparation claimed to bring about marked improvement in the mental and social lives of the senile is a combination of vitamins with the sodium salt of the amino acid, glutamic acid. A number of recent reports, including one from Harvard Medical School psychiatrists working with patients at the Boston Psychopathic Hospital, indicate that the vitamin-amino acid combination may act as a "cerebral tonic" in improving the ability of the aging brain to utilize its diminished oxygen supply.

Many of the symptoms of senility are believed to stem from a thickening of the cerebral arterial

walls, resulting in a reduction of blood flow to the brain. While the usefulness of the presently available combinations of B-complex vitamins, glutamic acid, and vasodilators in enhancing cerebral blood flow and nutrition is quite controversial, the approach employed appears to be a step in the right direction—correction of the basic biochemical lesion rather than mere masking of symptoms.

Another development of the past year has been the increasing use of tranquilizing drugs as adjuncts in the treatment of a wide variety of somatic complaints. For example, hydroxyzine (Atarax) has been employed, not only to relieve an-

PROBLE



iety and emotional tension in neuroses and in senile agitation, but also against headaches and spasms of both smooth and skeletal muscles. Recently, hydroxyzine has been combined with the synthetic steroid, prednisolone, for a two-pronged attack on arthritis. Such combinations may also prove effective in the treatment of itching dermatoses and allergic disorders with an emotional component.

Skeletal Muscle Relaxants

Gains were also made this year in the treatment of a number of neuromuscular conditions characterized by spasticity of skeletal muscle. A new "lissive" drug, zoxazolamine (Flexin) proved a valuable adjunct to treatment of cerebral palsy, multiple sclerosis, and other spastic states. Acting centrally to depress certain spinal and subcortical neurons, this drug eliminates skeletal muscle spasm without interfering with normal muscular activity.

The tranquilizer, meprobamate (Miltown, Equanil) introduced in 1955 for treatment of neuroses, was employed with increasing frequency this year against muscular spasms of varied origin; the combined muscle relaxing and emotional tension relieving actions of meprobamate appear to be especially effective in the rehabilitation of physically disabled patients whose recovery has been hampered by emotional maladjustment.

Muscular rigidity is markedly reduced in parkinsonism by ad-

ministration of a new agent, procyclidine (Kemadrin), claimed to be more effective and less likely to cause side effects than any drug previously employed.

New Concept in Constipation

Chronic constipation is common in the elderly, and especially in the bedridden. While lack of exercise, improper diet, and insufficient fluid intake are its primary causes, constipation is often the result of excessive use of cathartics. Consequently, doctors at the University of Michigan Hospital attracted a great deal of attention when they reported excellent results in treating constipation with a non-cathartic compound, the synthetic wetting agent, dioctyl sodium sulfosuccinate.

This chemical, which has recently been widely marketed under a variety of trade names such as Molofac, Diovac, Colace, is not new; it has been used for about fifteen years in soapless shampoos and other products because of its ability to reduce surface tension and permit easy mixing of water with fatty material. This same simple physical effect gives the chemical its fecal softening property in constipation. By permitting fluid to penetrate hard fecal impactions, the detergent causes the contents of the bowel to absorb water and retain it. The bulkier stool thus formed stimulates normal peristalsis and brings about evacuation without irritation of the intestinal mucosa,

[Continued on page 69]

SCIENCE SHORTS



Children under two years of age are not too young to undergo skin tests for allergy, according to *Journal of Diseases of Children*. Studies at Flower Fifth Avenue Hospital, New York, indicate that early treatment may forestall or shorten inroads of allergy later.

The human cell divides to form forty-six chromosomes, not forty-eight as biologists have long believed. This was proven by Dr. Joe Hin Tjio at the International Congress of Human Genetics in Copenhagen, according to Medical News.

Studies by Dr. W. M. Brown suggest that there is no absolutely safe dose of radiation because every exposure increases the risk of leukemia. Findings, reported in *Medical News* (Sept. 10), are based on data obtained from 1,346 persons given x-ray therapy.

Meprobamate (Miltown, Equanil) may still be the most helpful, least harmful drug for nervous tension, but it can cause addiction and then withdrawal symptoms in certain patients, warns Dr. Frederick Lemere in a release from AMA (Sept. 28).

Poliomyelitis had 45 per cent fewer victims in the first eight months of 1956 compared with the same period of 1955, according to statistics issued by the Metropolitan Life Insurance Company on October 3.

Pipazeric Citrate (Antepar) given in a massive dose once daily for seven days proved most effective for pinworm infestation. Roundworms were successfully purged by two massive doses in two days. Findings were reported in a recent release from AMA.

A busload of nurses, weaving its way through an out-lying section of New York City, comes to a stop in front of an old three-story frame dwelling at 912 Bronx Park South. Nearly opposite is a part of the nationally famous Bronx Zoo, a sightseers' paradise. Yet it's not toward the zoo that these nurses turn their steps as they file out of the bus; they have come, instead, to visit Bridge House (as the old structure is called) and to learn about its unique program for dealing with the problem of alcoholism.

Technically a rehabilitation center operated by the Bureau of Alcoholic Therapy, a branch of the city's Department of Welfare, Bridge House is often referred to as a "school"—and not without good reasons. Its program is concerned with teaching its "students," all alcoholics the use of will power in overcoming chronic addiction. Its instructors are all "alumni"—former alcoholics who understand the problem from personal experience and whose own self-rehabilitation is proof that the plan is sound. It successfully "graduates" some 65 per cent of its enrollees after a year of total abstinence.

Founder and director of Bridge House is Edward J. McGoldrick, Jr., whose efforts to cure his own addiction to alcohol led to the establishment of the program many years ago. A practicing attorney in New York City at the time, Mr. McGoldrick had been in and out of various sanitaria for nearly ten years without making any marked

BRIDGE HOUSE

by Marion L. Briggs



progress in the way of finding a "cure." After consulting psychologists, psychiatrists, and other specialists, and after delving deeply into the literature on alcoholism, he began experimenting with a therapeutic plan of his own.

This plan was developed slowly, one step at a time, as Mr. McGoldrick struggled valiantly to overcome his habitual desire for drink. It was based on his conviction that



he could, through the exercise of will power, redirect his thinking and energies from negative to positive channels. Periods of progress were frequently offset by periods of back-sliding; he admits that he sometimes "went on a toot" several days a week. His persistency, however, finally won out; and in the process of curing himself, the lawyer evolved a method that has since helped thousands of others.

A basic feature of the McGoldrick approach is a so-called "mental diet"—a list of seventeen "thought capsules," intended to convince the alcoholic that he is the victim of a self-inflicted habit resulting from wrong thinking. In step-by-step fashion, the diet endeavors to show him how he can fill his life with constructive beliefs and activities to replace whatever inadequacy has been driving him to drink. At Bridge House, this

mental therapy supplements a program of personal conferences, class meetings, and occupational activities.

Bridge House itself is the outgrowth of the program's more humble beginnings in the early nineteen-forties. When the late Fiorello H. LaGuardia, then the city's mayor, offered Mr. McGoldrick the post of assistant corporation counsel, the lawyer asked instead for permission to establish a municipal bureau of alcoholic therapy. This, Mayor LaGuardia agreed to after hearing how Mr. McGoldrick had helped himself, and subsequently numerous others, with his sobriety program.

Starting in 1943 with a desk at the Municipal Lodging House in Manhattan, Mr. McGoldrick spent eighteen months encouraging alcoholics among the city's down-and-outers to try his total-abstinence

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ence plan. He succeeded so well that the Mayor decided, in 1944, that the bureau should have more suitable and less temporary quarters. An old house in the Bronx, which the city was holding for non-payment of taxes, was available. Naming it Bridge House—presumably because the McGoldrick program bridged the gap between alcoholism and sobriety—Mr. LaGuardia turned it over to the new bureau.

The uptown location, incidentally, has disproved the popular notion that the Bowery and its "Skid Row" environs produce most of the city's alcoholics. A much larger group, and one more amenable to treatment, is represented among those who seek help at Bridge House.

Bridge House accepts only male applicants, selecting them by personal interview, and rejecting any who need medical or psychiatric help. Each is required—unless job or home obligations make it impossible—to reside at Bridge House for at least the first three weeks of the course. And since the principal criterion for admission is the man's sincerity, he must neither be intoxicated nor bring a drop of alcohol with him when he enters the house.

During this indoctrination period, the residents are not permitted to leave the premises except for short walks. Following a rigid daily schedule, which starts at 6:30 A.M., they are expected to care for their own rooms, assist with various chores about the house, and

attend morning, afternoon, and evening lectures. Between times, when not otherwise engaged, they must confer at least once a day with their instructors—from whom they receive personal encouragement and help in shaping new thought patterns. These once-a-day conferences are also a "must" for the remainder of a year after the residency period. Mr. McGoldrick is convinced that no less than a year is adequate to evaluate the sincerity and success of an alcoholic in conquering his habit.

Over a twelve-year period, Bridge House has helped more than 5,000 alcoholics. Yet its waiting list is always long; and since the house can accommodate only about sixteen residents, expansion of its facilities has been urged by the Bronx County Medical Society which officially has endorsed the project.

The tax-supported service—for which the alcoholic pays no fee—costs the city in the neighborhood of \$50,000 a year, or about \$140 for each individual it helps to rehabilitate. Not long ago, Bridge House urged the city to establish a similar program for women—pointing out that it constantly receives calls from women alcoholics seeking aid and advice.

The essentials of the program, together with Mr. McGoldrick's own story of his personal battle with alcoholism, are incorporated in his book, *Management of the Mind*, published by Houghton Mifflin Company, which is available to the general public.

MENTAL DIET FOR ALCOHOLICS

1. I know I must abstain from alcohol, not merely for the sake of others, but first and foremost for my own self-esteem. The solution of the problem rests primarily with me.
2. I refuse to amuse others with my drinking escapades of the past. My abnormal drinking was pathetic, not funny. I know that fundamentally frustration was the cause of my abnormal drinking. I realize I was seeking to escape from the belief in my inability to express myself as I desired.
3. If I pray for help I don't expect God to throw a miracle. He cannot do for me what can only be done through me. Persistent effort must be made. God will provide the food—He won't cook the dinner.
4. An alcoholic is made, not born. Heredity, therefore, is not the cause of my drinking. Such an excuse is an age-old dodge to avoid the reality of seeing myself as I really am.
5. I know my drinking past has no power over me other than my present feeling about that past gives it. Therefore, I will avoid thinking about, or talking about my former drinking escapades.
6. Regret and despair over yesterday's drinking will only make today a torment, and since tomorrow grows out of today, it will bear the image of today. I will avoid such manner of thinking, as it is only living in a rut.
7. I know there is a danger in being too self-confident because of short-lived sobriety. A sense of exhilaration, as well as one of depression, is equally a good excuse for taking a drink.
8. I do not need alcohol. Others can do without it, so can I. Any person of average intelligence who is sincere, and honestly exerts an effort over a reasonable length of time, can lead a life without alcohol.

[Turn the page]

9. I know from my own personal experience that drinking never solved a problem for me. As a matter of fact, it only made matters worse.
 10. I realize that I must be absolutely sincere in my effort to overcome the habit of drinking, otherwise no one can help me.
 11. I know that I have put a lot of effort and time into becoming an alcoholic. I know that were I to exert a similar effort and concentrate on doing so, I could successfully achieve that which I want to do, to be, or to have.
 12. I know that I cannot do everything I wish to do in twenty-four hours, but staying sober and working diligently, all things can be handled in due course.
 13. I realize that staying sober is of paramount importance in my life, and that one drink of any form of alcohol, including wine or beer, is sufficient to start me on a spree.
 14. I know that in abstaining from liquor I am not doing something big for society, but only doing that which I ought to do.
 15. I realize that I must not neglect my physical health.
 16. I know that my abnormal drinking has retarded maturity. I therefore realize that what I need is a change of thought, and that a change of thought is only a normal perception of values which were distorted during my drinking career.
 17. I realize that it is necessary to abstain from alcohol, but my ultimate goal is to attain a peace of mind in an active, industrious and constructive life.
-

The efficacy of these suggestions lies in their sincere, conscious acceptance, not by merely memorizing or intellectually assenting to them. They are the result of long, practical experience successfully applied as guides to enable the alcoholic to know himself and thus attain permanent sobriety.

[Reprinted with the authorized consent and approval of the City of New York.]

NEWS CAPSULES



NEWS New Jersey State Nurses Association, convening recently in Atlantic City, authorized its board of directors to appoint a committee to study the state's medical and nurse practice acts with a view to providing legal safeguards and proper preparation for R.N.'s who (1) "are expected increasingly to perform so-called nursing specialties to meet the needs of the medical profession," and (2) "will be expected to perform duties beyond [their] basic preparation" in New Jersey's civil defense and disaster control programs.

NEWS Effective January 1, 1957, nurse officers in the armed forces, together with all other military personnel, are to be covered by Social Security on the same basis as civilian workers. Circular 608-18, issued recently by the Army, provides a comprehensive outline of the new program, authorized by congressional enactment

last summer of Public Law 881 (Servicemen's and Veterans' Benefits Act).

NEWS "Practical Management of Poliomyelitis and Principles of Rehabilitation" is the subject of the fourth postgraduate course to be offered jointly by Baylor University College of Medicine, Southwestern Poliomyelitis Respiratory Center, and Jefferson Davis Hospital, in cooperation with the National Foundation for Infantile Paralysis. The course is to be given at Texas Medical Center, Houston, February 25-March 1; tuition, \$25. For further details, address Dr. William A. Spencer, 1300 Kenwood Lane, Houston, Tex.

NEWS Election results from recent conventions of various state nurses associations: *Sister Agnes Miriam* elected president of Kentucky SARN; *Mrs. Alice W. Schindel* re-elected president of Maine

SNA; *Mrs. Edward J. Conner* chosen president-elect (a new office) of Oregon SNA; *Miss Daphne Rolfe* elected president of Minnesota SNA; *Miss Catherine Sterling* elected president of Tennessee SNA.

NEWS The National Foundation for Infantile Paralysis has named Dr. Thomas M. Rivers to the post of medical director. He succeeds Dr. Hart E. Van Riper, who resigned recently to become medical director of Geigy Pharmaceuticals, Ardsley, N.Y. Dr. Rivers, former vice-president of the Rockefeller Institute for Medical Research, has been closely identified with the development of the Salk vaccine.

NEWS Federal legislation enacted recently allows a jury to recommend death as a penalty for the illegal sale or gift of heroin to persons under age 18. Minimum penalty for the offense becomes ten years' imprisonment and a \$10,000 fine. Other fines up to \$20,000, and sentences up to forty years, are provided for in a general overhaul of the narcotics law.

NEWS A Baltimore man who conducted a home-study correspondence course in practical nursing has been found guilty of using the mails to defraud. The course offered by Donald J. Herzog provided no clinical training and, according to the federal judge who heard the case, appeared to be conducted by a "technical training

society" whose staff—it was fraudulently claimed—included a registered nurse. Defense attorneys said the course was not intended to prepare anyone for officially sponsored examinations in practical nursing. But Judge R. D. Watkins cited advertisements and promises to students as examples of misrepresentations by Herzog.

NEWS Effective January 1, 1957 are many changes in GI insurance and indemnity programs. Authorized by recent enactment of Public Law 881, the changes include a provision enabling World War II and post-Korea veterans to reinstate any GI five-year term insurance lost since July 23, 1953, through failure to pay either or both of the last two monthly premiums. Inquiries concerning the revised law's provisions should be addressed to the Veterans Administration, Washington 25, D.C.

NEWS A newspaper report, stating in effect that student nurses at the University of Utah College of Nursing would, starting in 1959, be paid by Salt Lake County General Hospital for work "beyond that necessary for their clinical experience," has been clarified by Mrs. Mildred D. Rordame, dean of the college. The university, she explains, has an agreement with the hospital whereby clinical instruction, carried out by faculty members of the university, is given at the hospital to UUCN's student

[Continued on page 72]



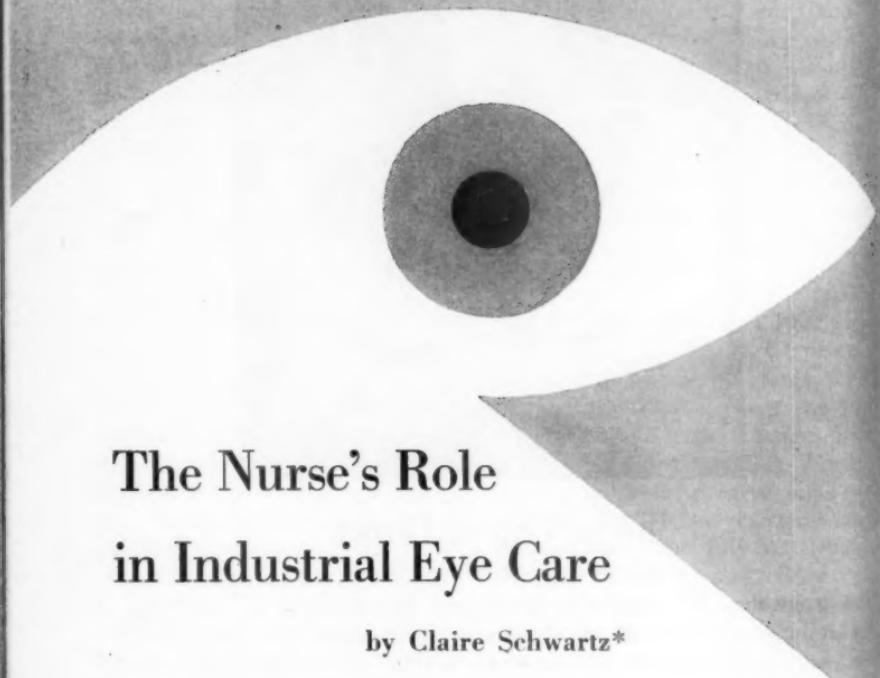
From Cap to Crown

■ MORE than 800 uniformed nurses from Los Angeles' hospitals took part in a coast-to-coast television program recently that paid tribute to nursing. Enthroned as "Queen for a Day" on the NBC show was Mrs. Erma Baker, a young student nurse at Los Angeles' College of Medical Evangelists.

Like all of the program's candidates, Mrs. Baker became eligible for "Queen" honors on the basis of a wish she had written on the back of her admission ticket. She wished for a baby sitter that would take care of her three boys while she completed her next year of nursing studies. The audience, by applause, picked her over four others on the show.

Mrs. Baker's wish was granted. Then, Master of Ceremonies Jack Bailey heaped additional gifts on the young mother: a glamorous whirl of Hollywood, an entire wardrobe, color TV set, washing machine, and a year's supply of specially designed uniforms.

Biggest prize of all was a trip to Europe for herself and her husband, Calvin, who is a medical student. Mrs. Baker will visit London, with greetings from American nurses to their English counterparts in the form of a scroll to be presented to the Rt. Hon. Lain MacCleod, British minister of Health. She'll also visit Belgium, Holland, France, and Heidelberg, Germany, where her sister is completing her senior year as a nursing student.



The Nurse's Role in Industrial Eye Care

by Claire Schwartz*

INDUSTRIAL nursing isn't always as dramatic and challenging as some imagine it to be. Only on occasion does it mean patching up a worker who has incurred the wrath of a twenty-ton machine. As anyone in this field knows, much of the industrial nurse's time is spent in dispensing hangover remedies, removing splinters, instilling eye drops, applying antiseptics and Band-aids, and keeping records.

Yet every plant has its share of serious injuries; and among these, none requires more immediate and skillful nursing than an injury to the eye. Some 75,000 such injuries are reported annually, according

to the National Safety Council, and countless others occur which workers never report. In an article published in the *American Association of Industrial Nurses Journal* (August 1956), Dr. Marshall B. Atkinson places the national outlay for industrial eye injuries at approximately \$225,000,000 a year.

Because the eye is one of the least expendable organs, all nurses—especially those in industry—should know the basic rules of eye care and keep abreast of the latest therapeutic techniques.

*The author is a consultant in occupational health nursing for Employers Mutuals of Wausau.

How would you feel if your failure to take prompt and appropriate action resulted in the impairment—or loss—of a worker's sight?

In smaller plants—those without a full-time physician—the nurse should request and follow a written list of "guiding principles," particularly in caring for eye injuries. Such a list serves two purposes: it outlines the proper procedures for the treatment of industrial injuries; it guides the nurse in keeping within the ethical bounds that separate nursing and the practice of medicine.

A well-organized plant dispensary generally has a small room or an isolated corner reserved for emergency eye care. Its equipment includes an adjustable lamp on a standard, a metal chair with head rest, a table or tray with special supplies and prescribed medica-

tions, a binocular loup or some other type of magnifying lens, and whatever vision-testing apparatus is deemed necessary by the physician in charge.

Supplies and medications usually suggested for a dispensary eye kit include: (1) an irrigating bulb in a gravity bottle containing a saline solution; (2) sterile eye droppers and medicine glasses; (3) cotton-tipped applicators; (4) sterile eye pads; (5) Elastoplast roller bandages; (6) adhesive tape; (7) boric compresses; (8) a 10 per cent sodium sulymid ointment; (9) a 30 per cent sodium sulymid solution; (10) a local anesthetic (such as holocaine, pontocaine, or butyn); (11) tablets for the relief of pain; and (12) a variety of such commercially available eye drops as can safely be administered to patients who ask for them. Such drops may have both a therapeutic and psychological value for persons accustomed to using them regularly. In administering them after eye injuries, however, it is important that the dropper be sterile.

For other itemized eye-kit lists, the reader is referred to Dr. Atkinson's previously mentioned article, as well as to the list published by Dr. Hedwig S. Kuhn, an eminent industrial ophthalmologist, in both the *National Safety News* and her book on eye care.

Good dispensary practice requires the nurse to keep all materials for eye care in covered jars,

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separate from other emergency supplies. It also requires her to observe the following "ground-rules" in caring for eye patients:

¶ Wash hands before examining the injury—i.e., after assembling materials and adjusting lights. Wash them again after treating the injury.

¶ Tell the patient to assume a comfortable position and explain what you're going to do.

¶ Use sterile supplies for each eye treated.

¶ Never use an eye cup.

SIE

¶ Never exert pressure on an eyeball.

¶ Never put argyrol, boric acid, ointment, or oil into an injured eye without a specific order.

¶ Use local anesthetics with moderation; repeated use may delay healing.

¶ Never use an instrument in administering eye care—and never use *anything* pointed or sharp in removing a foreign substance.

¶ Remember that it isn't merely the "hazardous" kind of job that can cause an accident; eye injuries may occur on safe jobs, too.

The more common industrial eye injuries include ecchymosis, lacerations of the lids and adjacent facial areas, corneal foreign bodies and abrasions, and burns caused

by chemicals, welding arcs, fire, or explosions.

In administering eye care, the nurse's first step—after relieving initial pain and orbicular spasm with a local liquid anesthetic—is to determine the probable extent of the injury. Its seriousness can be judged by loss of vision, bleeding, presence of a large wound, or a "soft" eye. Visual acuity can be gauged by use of the Snellen Test-Letter Chart—or, in serious cases, by the patient's ability to count fingers at a distance of two feet or to detect light.

Next essential is to get a quick history of the accident, including the kind of work the patient was doing, what tool, machine, or

[Continued on page 70]



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AS SEEN ON:

Queen for a Day

DRUGS OF '56

[Continued from page 54]

and without recourse to any of the other usual means of stimulating the intestine artificially. Obviously, the chemical should find wide use in regimens for reestablishing normal bowel habits.

New Antibiotic Against TB

Cycloserine (Seromycin) is an antibiotic which appears to be strikingly effective against strains of tuberculosis organisms resistant to the chemotherapeutic drugs and antibiotics in common use. Used alone or in combination with isoniazid, it offers hope for patients with pulmonary tuberculosis whose condition appears to be deteriorating in spite of treatment with the agent currently available.

However, cycloserine is not a harmless drug. With the doses required to bring about adequately high blood levels, the drug has caused mental disturbances and convulsive seizures in about 8 per cent of the patients who have received it. While lower doses may be adequate for most patients, disturbing side effects may still occur, especially when poor renal function results in reduced excretion of cycloserine. The antibiotic is also contraindicated in patients with histories of epilepsy, psychosis, or personality disturbances.

Years of clinical trial may be required before the place of cycloserine in tuberculosis therapy is fully established. At present, the

antibiotic is recommended only for patients refractory to previous treatment. In new, previously untreated cases, the established drugs—streptomycin, isoniazid, and p-amino-salicylic acid—are preferred.

Oral Anti-Diabetic Agents

The new oral hypoglycemic agents, the sulfonylureas, tolbutamide (Orinase) and carbutamide (BZ-55),* are still undergoing careful clinical trial to establish their proper place in diabetes therapy. Their greatest potential field of usefulness appears to be among middle-aged and older diabetics, and in a minority of mild and severe cases; here, the drugs may, on the one hand, eliminate the need for insulin, and on the other, reduce the insulin requirements. While the two sulfonylureas appear to be free from major side effects, their potential hazards have not yet been fully evaluated. Consequently, doctors are proceeding cautiously in the use of these agents, especially since they are not likely to do away with the need of most patients for insulin injections.

It must be apparent, even from this brief review, that considerable progress has been made during the past twelve months. No one drug developed this year was so startling new that it changed entirely the concepts of treatment in any major clinical condition; yet the doctor's armamentarium has been enriched in important areas.

*Because of toxic reactions, the testing of carbutamide was stopped on October 26.

THE NURSE'S ROLE

[Continued from page 67]

chemical was involved, and what kind of small particle (wood, steel, abrasive, etc.) caused the injury.

In removing a foreign body, irrigation (if at all possible) is advised; otherwise, the nurse should use a cotton-tipped applicator. Following removal of the object, if ordered, she should put a small amount of sodium sulymid ointment in the eye, close it with a patch for at least half an hour, and order the patient back in twenty-four hours.

If there is any chance that the foreign body has penetrated the eyeball, a patch should be applied immediately and the patient hus-

tled off to an ophthalmologist. A somewhat similar procedure applies if the object be protruding from the eyeball: The nurse should never attempt to pull it out; instead, she should have the patient lie flat (and quiet), support the lids to prevent pressure on the foreign body, and call the ophthalmologist for orders. Usually such patients are ordered to the hospital via ambulance, accompanied by the R.N.

The procedure for handling a "flash" injury—one caused by a cumulative reaction to the ultraviolet radiation emanating from a welding arc—is: Anesthetize the eye carefully at one corner; check to be sure no foreign body is present; apply ice compresses; warn

New Way to Reduce Hemorrhoids

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who have suffered from hemorrhoids for many years obtained marked pain relief in a matter of two to three days. Also, patients with cryptitis, fissures of the perianal skin and proctitis were greatly relieved.

A continuation of these studies indicated reduction and retraction of hemorrhoids, cessation of bleeding episodes, and relief from pruritus in from 48 hours to two weeks. Preparation H is now available in suppository or ointment form at all drug stores—money back guarantee. Whitehall Pharmacal Co., 22 E. 40th Street, New York, N.Y.

*Reg. U.S. Pat. Off.

R.N.—*a journal for nurses*

the patient not to rub the eye; provide him with dark glasses: If he is not relieved in six hours, he should be sent to the ophthalmologist.

All eye injuries caused by chemicals are serious. Here, the first rule is to irrigate—within fifteen seconds if possible. This means that workers who handle chemicals should be trained to go into action immediately with water, if eye irrigating units are not available in the area; if no faucet is handy, they should douse their heads repeatedly in the nearest emergency water-bucket (plants using chemicals generally place such buckets at strategic points), then go at once to the dispensary. There, with the nurse taking over, the eye is

thoroughly irrigated, anesthetized, further irrigated with a normal saline solution for about fifteen minutes, and examined for possible imbedded chemical particles. An eye patch is then applied and the patient is referred to the ophthalmologist.

Immediate medical attention is also a must for any case of "red eye," whether with or without pain. This symptom may indicate conjunctivitis, iritis, glaucoma, hemorrhage, trauma, or some other serious (and possibly contagious) condition.

In conclusion, let me add that it's well to remember this: Skin may grow back, bones may mend; but eyes, once lost, cannot be replaced.

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NEWS

[Continued from page 62]

nurses. All students pay full tuition and board and room. Any work that a student does is an agreement between the student and the hospital. If freshman and sophomore students are employed by the hospital on their days off, it is usually as nurses' aides or in work not related to nursing.

NEWS Six Japanese military nurses have received certificates of on-the-job training at the U.S. Army Hospital, Zama, Japan, where hospital procedures as practiced in this country are being taught under the direction of Capt. Virginia Brown, ANC.

NEWS To enable its members to be better informed when voting for their association candidates, California State Nurses Association has asked those seeking office in 1957 to fill out a questionnaire giving their views on CSNA programs. These views, together with the usual biographical data on each candidate, are being made available to CSNA members with the mailing of the 1957 ballot.

NEWS Twenty-one nurses have received research fellowships, and investigators at twelve universities, three hospitals, and three private organizations (including American Nurses Foundation, Inc.) have been awarded nursing research grants from funds appro-

priated by Congress to the National Institutes of Health. The awards were announced by the U.S. Public Health Service, which administers the awards on the advice of the National Advisory Health Council. The fellowships are available to nurses interested in learning research methodology; the grants are awarded for projects concerned with "the direct improvement of patient care, improvement of nursing service administration, and important factors related to the education of nurses and better human relations in the patient environment."

NEWS International adoption of a proposed new emblem for protective identification of civilian medical workers, hospitals, and ambulances in wartime is being advocated by World Medical Association in cooperation with World Health Organization, International Committee of the Red Cross, and International Committee of Military Medicine and Pharmacy. Proposed design: Staff of Aesculapius in red on a white background.

NEWS "Prima facie evidence" that the antitrust laws have been violated in the sale of polio vaccine to the federal government has allegedly been obtained by House investigators, according to a recent statement by Congressman Chet Holifield (D., Calif.), who accused five nationally known drug firms of "collusive practices and price fixing." [Turn the page]

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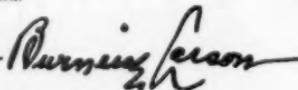
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NEWS A \$2-a-day fee increase—from \$14 to \$16—was authorized recently for private duty nurses in District 3, Ohio State Nurses Association.

NEWS Two hospitals operated by a Roman Catholic order of male nurses marked anniversaries recently. In Chicago, the Alexian Brothers Hospital celebrated its ninetieth birthday, while the order's hospital at Boys Town, Neb., was observing its first. The Congregation of Alexian Brothers was founded in the fourteenth century.

NEWS A student nurse, who was dismissed from her nursing school a month before she would have completed her three-year course because she allegedly slapped a 22-month-old patient, was reinstated by order of a superior court in Baltimore recently. After a three-day trial, the jury took only a few minutes to find that the school had violated its own rules in dismissing 22-year-old Mrs. Lucille Ann Wilhide. The defense contended that the student nurse was expelled illegally because school requirements at Baltimore's Union Memorial Hospital provide that final dismissal action must be approved by the nursing school committee before it is final. This committee, testimony revealed, considered expulsion too severe and recommended leniency. Mrs. Wilhide admitted that she had "tapped" the child on the cheek to make it take liquid nourishment.

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and that her action was improper. The jury was asked to decide on the legality of the school's dismissal procedure, not on the student's conduct.

NEWS A four-day sectional meeting of the American College of Surgeons, scheduled for February 4-7 at the Jung and Roosevelt Hotels, New Orleans, includes a special program for nurses, marking the third time in three years that ACS has cordially invited all nurses to attend its sessions. Details and advance registration forms are available from the Department of Organization and Assembly, American College of Surgeons, 40 East Erie Street, Chicago 11, Ill.

NEWS Fourth National Conference of Association of Operating Room Nurses will be held at the Hotel Statler in Los Angeles, California, February 18-21. Program subjects are: "the problem surgeon;" eye banks and corneal transplants; absenteeism and apathy; surgery of the newborn; electronic radiation. A problem clinic and a hospital day are two other highlights of the meeting.

NEWS Oregon State Nurses Association at its recent annual convention approved the revisions which it plans to ask the 1957 state legislature to make in the existing nurse practice act, a law that has had but minor changes since 1911. As revised, the act would, among other things: (1) legalize the ad-



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Minneapolis 1, Minn.

ministration of intravenous injections by R.N.'s working under medical direction; (2) strengthen provisions pertaining to licensure and school accreditation; and (3) otherwise define professional nursing and spell out the R.N.'s responsibilities. Should the proposals become law, OSNA would be given considerable police power in enforcing the revised act.

NEWS Marion Sheahan, associate general director of the National League for Nursing, has been appointed a member of the Veterans Administration advisory group . . . Catherine M. Sullivan, USPHS nurse officer, has been named assistant chief nurse at national headquarters of the Civil Defense Administration in Battle Creek, Mich. . . . Sister M. Ronalda, OSF, is the new director of nursing at St. Francis Hospital, Evanston, Ill. . . . Harvey Wheeler, 42, a Houston (Texas) polio patient, is reportedly the first male nurse to have been placed in an iron lung . . . Mrs. Joyce N. Benoit has been named nurse-in-charge at the *New York Times* medical department, replacing Polly Acton who retired last year . . . Nationalist China's first woman to become a major general, Chou Mei-yu, director of nurse training at Taipei's military medical college, is a graduate of Massachusetts Institute of Technology . . . Mrs. Julia K. Hrdina is the new director of the Massillon (Ohio) City Hospital School of Nursing.

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CLINICAL INSTRUCTOR: Formal and clinical teaching of pediatric nursing. 56 bed pediatric unit including premature nursery. 500 bed general hospital. School of nursing with enrollment of 100. N.L.N. fully accredited. B.S. Degree and/or advanced preparation desirable. Salary based on preparation and experience. Liberal personnel policies. Write to Director of Nursing, Newark Beth Israel Hospital, 201 Lyons Ave., Newark 12, N.J.

CLINICAL INSTRUCTOR IN MEDICAL & SURGICAL NURSING: Degree preferred. Position available at university affiliated

N.L.N. fully accredited school of nursing. Liberal personnel policies include tuition aid for advanced study. Apply Director of Nursing Education, Mount Sinai Hospital, 1800 E. 105th St., Cleveland 6, Ohio.

CLINICAL INSTRUCTORS: Medical-Surgical Nursing and Operating Room. 195 bed hospital with building program. NLN temporary accredited school. B.S. Degree in Nursing or Nursing Education and nursing experience desired. Liberal personnel policies. Excellent opportunities for advanced education. Contact: Director of Nurses, Silver Cross Hospital, Joliet, Ill.

CLINICAL INSTRUCTORS, MEDICAL & SURGICAL, INSTRUCTORS NURSING ARTS: For expanding hospital program. NLN fully accredited school of nursing with student body of 190. Salary commensurate with education preparation and experience. Position now open. For information write to Director of Nursing, The Toledo Hospital, Toledo 6, Ohio.

DEDICATED NURSES: Three, eligible for Colorado registration in Jr. college town of 12,000. New 56 bed hospital, 40 hr work wk, \$285 plus \$10 for shift differential. 2 hrs from Denver and Mtn. resort areas. Feel wanted and appreciated with us. Write Director Nursing Service, Logan County Hospital, Sterling, Colo.

DIRECTOR OF NURSING: Excellent opportunity to demonstrate your ability and use initiative directing activities of large nursing service in modern tuberculosis hospital. Preference given applicants with degree and responsible supervisory experience. Liberal holiday, vacation and illness allowances. Salary \$5100 to \$6000, depending upon qualifications. Please send detailed resume of training and experience to Personnel Director Board for Texas State Hospitals and Special Schools, Box S, Capitol Station, Austin, Tex.

DIRECTOR OF NURSING EDUCATION: Ambitious nurse with degree to be responsible for two-year college training program in large tuberculosis hospital. This may be the opportunity you seek and merit. Liberal holiday, vacation and illness allowances. New air-conditioned building. Salary \$4500. Please send detailed resume of training and ex-

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perience to Personnel Director, Board for Texas State Hospitals and Special Schools, Box S, Capitol Station, Austin, Tex.

DIRECTORS OF NURSING: (a) Dir. Nursing Service, new univ hosp, 300 beds, ability organize, adm. develop procedures, coordinate programs, June 1967, W. \$6-8000. (b) Dir. School, Service, 250 bed gen hosp, exceptional nursing, medical staffs, univ. city, E \$6-8000. (c) Dir. School, Service, 200 bed hosp, hth center of MW state, progressive administration, \$7000. (d) Dir. Nursing, leading children's hosp, outstanding opport. for responsible individual with initiative, strong adm. support, \$10,000. (e) Dir. Nursing, lge gen hosp, Florida seashore resort, well integrated nursing staff, newest methods, procedures in practice, \$6000. (f) Asst. Dir. Service, 160 bed American owned oil co. hosp, ocean city, 15,000, South America, \$7200, air transportation, RN 12-3 Burneice Larson, Medical Bureau, 900 N Michigan Ave., Chicago, Ill.

FACULTY POSTS: (a) Asst. Professors, in-service, med, surg. OB, Ped, head depts new univ school, bfl city, S. \$5500, 9 mos. (b) Science Instructor, OB, Communicable disease, 300 bed air-conditioned hosp, Amer. Co. foreign operations, swimming pool, golf course, paid air travel, \$5500-\$9200. (c) Ed. Dir., plan, direct, org., coordinate school, well estab hosp, S.F. Bay area, \$5500 up, also OB, \$5000. (d) Med-Surg, OB, N.A., OR, 200 bed hosp, reorg. program, good opport for persons with initiative, \$5-6000, MW. RN 12-4 Burneice Larson, Medical Bureau, 900 N Michigan Ave., Chicago, Ill.

FLORIDA: Florida State Hospital School of Nursing needs at once (1) Psychiatric Nurse

Instructor for affiliate program, (2) Medical-Surgical Instructor for basic program. Salaries good. Complete maintenance. State retirement program. Director, School of Nursing, Florida State Hospital, Chattahoochee, Fla.

GENERAL DUTY: 40 hr wk, 84 bed hospital, finest equipment, very liberal personnel policies and pleasant working environment. Must be willing to rotate shifts. Salary range \$277 to \$360 monthly. Atomic Energy Project but not Civil Service. Write Director of Nursing Service, Los Alamos Medical Center, Los Alamos, N.M.

GENERAL DUTY & OPERATING ROOM NURSES: 210 bed teaching hospital located 35 mi from NYC. Salary \$260 per mo with regular increments. 40 hr wk, \$20 extra for 3-11, \$15 extra 11-7 am. OR nurses \$10 extra per mo. Liberal personnel policies including 3 wks vacation, 12 days sick leave, Social Security. Pleasant living facilities provided if desired. Write or apply Director of Nursing, White Plains Hospital, White Plains, N.Y.

GENERAL DUTY & OPERATING ROOM NURSES: Wanted immediately for 150 bed hosp. 40 hr wk with liberal personnel policies. Nurses Home available at reasonable rates. All-graduate nursing staff. Apply Dir. of Nurses, Morrell Memorial Hospital, Lakeland, Fla.

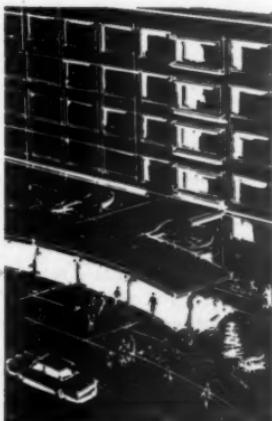
GENERAL DUTY NURSES: All shifts, all services, 466 bed hospital. Salary \$300 base pay, \$15 differential. Apply Cedars of Lebanon Hospital, 4833 Fountain Ave., Los Angeles 29, Calif.

GENERAL DUTY NURSES: 120 bed hospital, southern Wyoming community of 12,000. Liberal personnel policies, 40 hr wk. Starting

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salary \$280 with a charge of \$23 for full maintenance. Additional \$10 per mo. for evening and night duty with regular increases. Surgical Nurses starting salary \$290 plus \$5 per call after 5 p.m. Nurses' Home recently redecorated and refurbished. Write Director of Nurses, Memorial Hospital, Rock Springs, Wyo.

GENERAL DUTY NURSES: For 185 bed general hospital. Organized medical staff, high quality services, pleasant surroundings, comfortable living conditions in nurses home, excellent personnel policies. Apply Director of Nursing, John D. Archbold Memorial Hospital, Thomasville, Ga.

GENERAL DUTY NURSES: 118 bed general hospital located in a beautiful residential section along the North Shore of Chicago. Starting salary \$300 a month, bonus of \$30 for evenings and \$20 for nights. 40 hr. wk. Modern ranch style nurses' homes with attractively furnished private bedrooms. Contact Director of Nursing Service, Highland Park Hospital Foundation, Highland Park, Ill.

GENERAL DUTY NURSES: Needed for staff position in crippled children's orthopedic hospital. Salary \$245 per mo plus complete maintenance or \$319.50 without maintenance, 15 days vacation, 15 days sick leave, 5 day work week. Contact Director of Nurses, Carrie Tingley Hospital for Crippled Children, Truth or Consequences, N.M.

GENERAL DUTY NURSES: 50 bed approved hospital located in mountainous portion of Colo. College town. Salary \$275. 40 hr wk. sick leave, vacation bonus. Contact Superintendent, Community Hospital, Alamosa, Colo.

GENERAL DUTY NURSES: 56 bed general hospital. 20 beds to be added this summer. 40 hr wk, starting salary \$300. Additional for 3-11 and 11-7. Liberal personnel policies. Hospital located in Southern Calif. Joins Los Angeles on the west and Pasadena on the north. Alhambra Community Hospital, Alhambra, Calif. Apply Mrs. Norene, Director of Nurses.

GENERAL DUTY NURSES—AT MEDICAL CENTER: Start \$275 for 40 hr wk \$5 increases at 3, 9 and 15 mos. and \$10 increase after 24 mos., overtime premium pay, 2 wks paid vacation, 6 pd holidays, sick leave, free medical services, Social Security. We pay hospital insurance, life insurance, retirement annuity. Apply Personnel Director, Rochester Methodist Hospital Rochester, Minn.

GENERAL DUTY STAFF NURSE: New and modernized 300 bed general hospital offers top salaries and opportunities to advance. Evenings \$76.80-\$89.60 per wk, nights \$73.60-\$86.10, days \$64.00-\$75.60. Openings in Medical, Surgical, Obstetrics, Pediatrics, Operating Rooms and Emergency Room. 40 hr wk, merit increases, liberal policies. On Long Island Sound, 45 mins to N.Y.C. Modern nurses residence and school. Apply Director of Nursing, Stamford Hospital, Stamford, Conn.

GENERAL DUTY STAFF NURSES: New & modern 36 bed hospital, thriving community in Cascade Mountains. Washington standard wages. Usual pd vacation and sick time and 7 legal holidays. \$10 additional for p.m. and night duty. \$10 raise every 6 mos to maximum of \$315 per mo. Apply to Director Nursing Service, Skyline Hospital, White Salmon, Wash.

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GENERAL STAFF NURSES: For all depts. 240 bed hosp conveniently located near NYC. 40 hr 5 day wk, beginning salary \$260 per mo, \$30 bonus for 2:30-11pm, \$20 bonus for 10:30 pm-7am. Extra bonus for OR and Delivery Room. Increments are given every 6 mos for 5 yrs. 1 meal and laundering of uniforms gratis. Living quarters available at moderate cost. Excellent personnel policies. Overtime pay. 4 wks vacation after 1 yr, 8 pd holidays. Sick time cumulative to 60 days. In-staff educational program. Blue Cross insurance available. Pleasant working surroundings. Apply Director of Nursing Service, Presbyterian Hospital, Newark, N.J.

GENERAL STAFF NURSES: For 60 bed hospital, very well equipped and modern, located in northern Florida. Good personnel policies, increase in salary every 6 mos, holidays with pay, sick leave with pay and paid vacation. Apply Directress of Nurses, Catherine M. Hurst, R.N., Suwannee County Hospital, Live Oak, Fla.

GENERAL STAFF NURSES: For 200 bed general hospital. Openings in Ped, O.B. & Med-Surg. Minimum starting salary \$255. 40 hr work wk, special consideration given for experience and qualifications. Merit increases at 6 mo, 12 mo and annually thereafter. Evening and night duty differential \$10. Good personnel policies. Rooms available \$20 per mo. Write Dir. of Nursing Service, Memorial Hospital, Casper, Wyo.

GENERAL STAFF NURSES: This is a friendly place to work in preferred dept. of 200 bed JCAH general hospital with an active building program. Liberal personnel policies include 40 hr wk, retirement plan, paid hospitalization insurance premium, accumulative 30 day sick leave, 2 wks vacation, 6 holidays annually, meals at cost, rooms at \$20

per mo, 40 mins. from Detroit. Initial salary evenings \$336.80-\$371.47, nights \$322.80-\$357.47, days \$306.80-\$341.47. For details write Director of Nursing, Wyandotte General Hospital, Wyandotte, Mich.

GENERAL STAFF NURSES: 270 bed general hospital and 72 bed maternity hospital. Starting salary \$305 a month. \$5 month tenure increase for each 6 mos to maximum of \$335. \$25 additional for afternoon and night \$25 additional for surgery. Liberal paid annual vacation. 7 paid holidays, 8 hr day and 40 hr wk, Social Security and employer-paid health and life insurance program. Apply to Director of Nurses, Sutter Hospital, Sacramento, Calif.

GENERAL STAFF NURSES, MEN AND WOMEN: Opportunity to learn nursing team leadership in 400 bed well equipped, general hospital. Monthly salaries \$310 to \$350, plus differential of \$30.00 monthly for evenings or nights. Attractive personnel policies. Comfortable single room accommodations in residence. \$20 to \$25 monthly. Convenient transportation to colleges and city center. Write to: Director of Nursing Service, Mount Sinai Hospital Medical Center, 2750 West 15th Place, Chicago 8, Ill.

GERIATRIC STAFF NURSE: For small hospital in home for the aged. Good salary plus full maintenance. Chicago suburb. Write Miss Rumely, Box 231, Hinsdale, Ill.

GRADUATE NURSES: For medical and surgical services, modern 263 bed mid-Manhattan hospital. 5 day, 40 hr. wk. Starting salary, scrub nurses, O.R. \$301, floor duty \$291, Eve. \$330, nights \$320. Uniform laundry. Four annual increases, 4 wks. vacation, 11 holidays, sick leave 12 days per year cumulative, social security health service, free hospitalization. Opportunities for special assignments, research nursing bonuses and supplementary study. Housing agent available. Apply Supt. of Nurses, James Ewing Hospital, 1250 First Ave., New York 21, N.Y.

GRADUATE NURSES: Positions for those who either have or are willing to obtain Colorado registry. Floor duty, rotating shifts, uniform laundry and meals furnished, 2 weeks paid vacation and 7 days sick leave per year. 35 bed hospital in a growing community. Southwest Memorial Hospital, Cortez, Colo.

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\$250 a mo with differential for evening and night duty and operating room nursing. Good personnel policies. 5 day, 40 hr wk, vacation, pd sick leave, holiday time. Located in beautiful central Florida. Apply Director of Nurses, Seminole Memorial Hospital, Sanford, Fla.

GRADUATE NURSES: We're switching our style this time. Frankly, we're switching because we want to catch your eye. It's that simple. It's just our ad style that's been changed however. Our Hospital System (6 hospitals) is not changed. It's as good as ever. Of course our salaries have gone up again—Graduates begin at \$303, Ass't Head Nurses begin at \$337. Just write me for full information. Mrs. Betty Hartwig, R.N., Los Angeles County General Hospital, Box 1311, Los Angeles 33, Calif.

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GRADUATE NURSES: It's me again. You can't say we're not trying to catch your eye. For full information write me. Betty Hartwig (see above ad for address). Thanx.

GRADUATE NURSES: A report just received indicates Los Angeles County is the second largest metropolitan area in the U.S.A. Since 1948 our population has increased over 30%. Where there is growth there is opportunity—and we're still growing. This information is provided through the courtesy of the Los Angeles County Hospital System. The hospitals with the "forward look". Write Betty Hartwig, R.N., Box 1311, Los Angeles 33, Calif.

GRADUATE NURSES: There is plenty of opportunity for further study and professional development in Los Angeles. USC and UCLA are the largest schools located in the County. Our own School of Nursing is located at the Los Angeles County General Hospital. Betty.

GRADUATE NURSES: Last year at the Los

Angeles County General Hospital, Los Angeles, Calif., the patient case load was more than 1 million visits, 8000 injections were given each day, 13,000 babies were born here. If you are after professional development, this is the place for you! Our nurses do the professional job they were trained to do. Write me for further information. Betty Hartwig, R.N., Los Angeles County General Hospital, Box 1311, Los Angeles 33, Calif.

GRADUATE REGISTERED NURSES: For Medical, Surgical, Obstetrical and Pediatric services 150 bed general hospital, 40 hr wk, accumulative sick leave to 30 days, annual vacation of 3 wks, 6 holidays, Social Security and Blue-Cross benefits. Salary, staff nurses \$255-\$270, 7-8 duty, \$15 differential for 3-11 and 11-7 duty. Apply Director of Nursing, Scholtz Memorial Hospital, Waterloo, Iowa.

GRADUATE STAFF NURSES: For Medical, Surgical and Obstetrical Services. Also vacancies on operating room staff. Salary \$265 per mo for 8 hr day 40 hr wk. Annual vacation and sick leave. Retirement benefits if desired. Apply Administrator, Robinson Memorial Hospital, Ravenna, Ohio.

INDUSTRIAL, OFFICE, CLINIC: (a) Courier Nurses, stewardesses, air, rail, East, South West, overseas. \$360, expenses. (b) Supv. privately owned clinic, So. Calif. \$450. (c) Blood bank nurse, 300 bed hosp outside Chicago, 5 days. \$300-\$400. RN 12-5 Burnice Larson, Medical Bureau, 900 N Michigan Ave., Chicago, Ill.

LABORATORY AND/OR X-RAY TECHNICIAN: For work in modern clinic with 2 doctors. Salary open. Also need female registered nurses for hospital work. Man and wife combination would be ideal. Beaver County Hospital, Milford, Utah.

MEDICAL-SURGICAL SUPERVISOR-ADMINISTRATIVE: 500 bed voluntary hospital, 10 mi. from New York City with direct transportation to Times Square in 35 mins. Universities and colleges available both in New York and New Jersey for further education. B.S. Degree and/or satisfactory experience in supervision preferred but will consider person with satisfactory experience working towards degree. Salary dependent on education and experience. 40 hr wk, 8 holidays with full pay, 4 wks vacation yearly, liberal sick leave. Write to Director of Nursing, Newark Beth Israel Hospital, 201 Lyons Ave., Newark 12, N.J.

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NEW HOSPITAL: El Centro, California. 40 hr wk. General duty \$300-\$325 per mo. Contact Superintendent of Nurses, El Centro Community Hospital, El Centro, Calif.

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NURSE ANESTHETIST, EXPERIENCED: Write Eileen M. Tipaldo, Yolo General Hospital, Woodland, Calif.

NURSE ANESTHETIST: Permanent night position to supplement staff of six. Salary \$415 plus other benefits. Upper Midwest location J.C.A.H. approved hospital. Write Box SBH-1 c/o R. N. Magazine, Oradell, N.J.

NURSES: Registered Operating Room. 150 bed privately-owned hospital. 40 hr wk, 2 wks vacation, 5 holidays, pension plan, group life insurance, complete maintenance. Salary open, additional pay for call. Contact Personnel, Southwestern General Hospital, El Paso, Tex.

NURSES: Needed for 46 bed modern hospital in beautiful Willamette Valley only 14 miles from Salem, capital of Oregon. Excellent personnel policies, base pay \$255 per month with \$20 differential for afternoon and night duty and one meal a day furnished free. Living accommodations moderate and not difficult to find. Write Ovanda Emmert, R.N., Administrator, Silverton Hospital, Silverton, Ore.

NURSES: Graduate, registered, staff, inservice education, liberal personnel policies, rotating shifts. Located near Gulf. Social Security and retirement plan available. Starting salary \$300. Apply Nursing Supervisor, Polio Center, 1801 Buffalo Drive, Houston 3, Tex. CA 4-7875.

NURSES: Modern 200 bed, fully accredited hosp. in beautiful Cumberland Valley college town, has openings in General Duty (Medical and Surgery), Operating Room, Pediatrics, Maternity and Nursery. Friendly, informal atmosphere. 40 hr wk, 7 pd. holidays. Free hospitalization, Social Security, 2 wks vacation after 1 yr. other benefits. Apply Dorothy D. Bollinger, R.N., Director of Nursing, Chambersburg Hospital, Chambersburg, Pa.

NURSES: General hospital, 236 beds, new

building, modern equipment. 30 miles from New York City. Liberal personnel policies. Write Director of Nursing, Morristown Memorial Hospital, Morristown, N.J.

NURSES: General Duty, for 30 bed hospital 35 miles from New York. Excellent salary. Apply Administrator, Tuxedo Memorial Hospital, Tuxedo Park, N.Y.

NURSES WANTED: A qualified Instructor in Tuberculosis Nursing. Salary range \$300 to \$375 per month. Charge nurse—salary range \$275 to \$350 per month. Staff nurse—salary range \$240 to \$275 per month. Complete maintenance with nicely furnished room available at a cost of \$30 a month. Fringe benefits and liberal vacation, holidays, and sick leave allowance. Beginning salary commensurate with qualifications. Apply to Supt. of Nurses, Idaho State Tuberculosis Hospital, Gooding, Idaho.

OPERATING ROOM ASS'T SUPERVISOR: For 600 bed general hospital. New, modern air conditioned Operating Room Suite (13 rooms) to open in November 1956. Attractive personnel policies, salary dependent on preparation and experience. B.S. Degree desirable. Student nurse and student technician training program. Adequately staffed. Apply to Director of Nurses, Western Pennsylvania Hospital, Pittsburgh 24, Pa.

OPERATING ROOM NURSES: For 200 bed hospital. Openings for Ass't Supervisor and Staff. Minimum starting salary \$255. 40 hr work wk, Special considerations given for experience and qualifications. \$20 per mo for call. Average call 2 nights per wk. Good personnel policies, rooms available \$20 per mo. Write Director of Nursing Service, Memorial Hospital, Casper, Wyo.

OPERATING ROOM NURSES—AT MEDICAL CENTER: Start \$285 for 40 hr wk \$5 increase at 3, 9, and 15 mos., \$10 increase after 24 mos. Overtime premium pay, paid vacation, 6 paid holidays, sick leave, free medical services. Social Security. We pay hospitalization insurance, life insurance, retirement annuity. Apply Personnel Director, Rochester Methodist Hospital, Rochester, Minn.

OPERATING ROOM SUPERVISOR: Experience desirable but not necessary. Sick leave and annual vacation. Retirement benefits available. Salary open. Apply Administrator, Robinson Memorial Hospital, Ravenna, Ohio.

OPERATING ROOM SUPERVISOR: 118 bed Gen. Hosp. in a beautiful residential suburb

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PEDIATRIC INSTRUCTOR: Who knows what pediatrics really is, and how to interpret it to student nurses. Superior working conditions, freedom to use personal initiative and imagination, cooperative co-workers and associates in outstanding Children's Hospital of friendly Kentucky Derby City. Salary entirely dependent upon preparation and experience. This is an unusual opportunity for an alert, ambitious nurse who would enjoy doing creative work in a happy atmosphere. For details write Director of Nursing, Children's Hospital, Louisville, Ky.

PEDIATRIC TEACHING SUPERVISOR: For 32 bed unit in 220 bed general hospital with School of Nursing. Apply Director of Nursing, Orangeburg Regional Hospital, Orangeburg, S.C.

PUBLIC HEALTH: (a) Dir. new program, org. develop procedures, policies, adm, leading SW oil capital, \$7740, expenses, (b) Instructor, status Asst. Prof., head dept, newly created univ. school, Ig city, near resorts. \$85500. (c) School Nurse, two elementary schools, within walking distance, outside Chicago. \$390-\$425. RN 12-6 Burneice Larson, Medical Bureau, 900 N Michigan Ave., Chicago, Ill.

PUBLIC HEALTH NURSE: For generalized program in Hidalgo County Health Dept., Rio Grande Valley, Texas. Starting salary \$300-\$360 depending on qualifications. Must own car. Monthly car allowance furnished. Texas registration required. Write Dr. David M. Cowgill, M. D., Room 427, Courthouse, Edinburg, Tex.

PUBLIC HEALTH NURSE: 48 yr old organization employing 4 reg. nurses and 2 trained practical nurses. Salary open, liberal personnel policies, 1 mo. vacation and car allowance. Apply Mrs. Robert M. Eiss, 115 E. Forest Ave., Neenah, Wis.

PUBLIC HEALTH NURSE CONSULTANT: Maternal and Child Health: To provide technical program guidance and staff education in maternal and child health areas of generalized public health nursing program. Salary \$5400 to start with 4 annual increases to \$6480. Permanent career service, liberal benefits. Qualifications: 4 yrs public health nursing experience, including 1 yr in a teaching, consulting, supervisory or administrative capacity, and 1 yr in the field of maternal and child health. Master's Degree in public health nursing or public health nursing education with major course work in maternal and child health. Miss Madelyn Hall, Director of Public Health Nursing, Philadelphia Dept. of Public Health, Room 615 City Hall Annex, Phila., Pa.

PUBLIC HEALTH STAFF NURSE: For general Visiting Nurse Service for Boro of Carlisle and 10 mi. area, 5-5½ day, 40 hr wk under qualified supervision. Attractive college town and rural area, 20 mi. from capitol city of Harrisburg. Educational opportunities, Blue Cross, Blue Shield available, Workmen's Compensation. Agency car and expenses provided. 3 wks pd vacation, 7 holidays, sick leave. Education and/or training in Public Health Nursing desirable but not required. Eligible for R.N. in Penna. Salary dependent on background. Positions open immediately. Write or 'Phone collect Director Visiting Nurse Service, Carlisle Hospital, Carlisle, Pa.

QUALIFIED PUBLIC HEALTH NURSE & REGISTERED NURSE: Salary for public health nurse \$4000. Immediate appointment on a provisional basis. Permanent appointment with increases up to \$5080, 37 hr wk, liberal vacation and personnel policies, pension rights, in-service training, promotional opportunities. Generalized service including maternal and child care, school health and communicable disease control. Salary for registered nurses \$3500-\$3980. Opportunity for Registered Nurses seeking public health qualification. Immediate appointment, 37 hr wk, liberal personnel policies. Applicants must be able to matriculate for public health nursing courses at university. Applicants (except N.Y. State Veterans) must not have reached 36th birthday. Write or call the New York City Dept. of Health, 125 Worth St., New York 18, N.Y.

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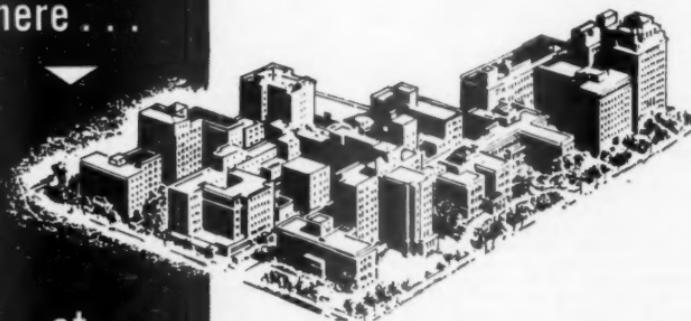
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R.N.'S: Under 50 years of age. General duty \$300-\$350 (5 steps), head nursing \$315-\$375 (5 steps). Retirement plan, sick leave benefits. Holidays, 3 weeks vacation, modern uses residences. State eligibility for Calif. registration. Tuberculosis, other chest diseases, chronic illness. Rehabilitation ward recently opened, interesting and challenging positions for qualified registered nurses. Submit photo to Director of Nursing Services, Tulare-Kings Counties Hospital, Springville, Calif.

R.N.'S: \$250 per mo. to start. \$5 increase every 6 mos. for 3 yrs. Full maintenance, 3 wks vacation, 1 wk sick leave after 1 year service. Deborah Sanatorium, Brown Mills, N.J.

REGISTERED NURSE: For new modern 30 bed hospital in agricultural valley located 80 mi from Reno. Starting salary is \$275 per mo 5 day wk, 3 meals a day, laundry of uniforms, differential for eve. and nights, hospitalization policy paid by hospital. 2 wks vacation, 10 days sick leave, 6 pd holidays. Assured increments. Contact: Administratrix, Lyon Health Center, Yerington, Nev.

REGISTERED NURSE: For new Bagdad 12 bed hospital, relief shift. Salary \$335 per mo. 10 day sick leave per year. Two weeks pd vacation. Bagdad Insurance available. Housing at low rent. Apply to R.G. Hardenbrook, M.D., Bagdad Hospital, Bagdad, Ariz.

REGISTERED NURSE ANESTHETIST: For new 12 bed Bagdad Hospital, with supervision of Nursing Staff. 8 hr day, 40 hr wk, 10 days sick leave, 2 wks vac. with pay. Extra pay for call back time. Housing at low rent. Employment available for spouse, if suited. Salary \$600. Apply R. G. Hardenbrook, M.D., Bagdad Hospital, Bagdad, Ariz.

REGISTERED NURSE FOR GENERAL DUTY: 50 bed modern hospital. Good living and working conditions. Salary \$280.00. Apply W. R. Coe Memorial Hospital, Cody, Wyo.

REGISTERED NURSE INTRAVENOUS THERAPY AND BLOOD BANK: 210 bed gen hosp, 30 min. from Grand Central. 40 hr wk, 3 wks vacation, good personnel policies, no experience necessary. Apply Director of Nursing, White Plains Hospital, White Plains, N.Y.

REGISTERED NURSES: 28 bed company owned hospital, immediate vacancy for operating room-clinic nurse. Openings for general duty. Salary \$16.38 and \$15.23 per day respectively, including complete maintenance. 5 day, 40 hr wk. Pd vacations, Social Security, etc. Apply Dorothy M. Haman, Supt., Steptoe Valley Hospital, East Ely, Nev.

REGISTERED NURSES: 65 bed general hospital located 40 mi from Dallas, Tex. Starting salary \$260 per mo. plus laundry of uniforms and one meal per day. Living quarters available. Apply Director of Nurses, City-County Hospital, McKinney, Tex.

REGISTERED NURSES: Are you looking for something new? Staff and Ass't Head Nurse positions open in beautiful new University of Oregon Medical School Hospital located on

hill overlooking Portland, Ore. Medical, Surgical, Pediatric and Psychiatric units. Excellent opportunities for learning, both in clinical areas and on campus. Staff members may take courses at reduced tuition rate (\$3 per quarter hr) leading to baccalaureate or Masters Degrees at the Nursing School on campus. Liberal personnel policies. The Northwest is a wonderful place to live and work. Write to Director of Nursing Service for full information, U of O Medical School Hospital, 3181 SW Sam Jackson Park Road, Portland 1, Ore.

REGISTERED NURSES: For general duty for 150 bed tuberculosis sanatorium in Bartlett, Alaska. Starting salary \$250 per month plus complete maintenance with a \$10 raise each six months to a maximum base pay of \$280. \$10 extra for evening and night shift. 8 hr. day, 40 hr. wk., 8 to 4, 4 to 12, 12 to 8 shifts. New modern nurses residence. Write to Director of Nurses, Seward Sanatorium, Bartlett, Alaska.

REGISTERED NURSES: Charge duty, 40 hr. wk., 6 paid holidays, 2 wks. paid vacation after 1 year, meals while on duty. Starting salary \$250 month, increase of \$5 every 6 mos. to maximum of \$275. Evening and night duty \$10 month extra. Nurse's Home completely furnished, including linen and laundry available for \$30 month. Gooding County Memorial Hospital, Gooding, Idaho.

REGISTERED NURSES: General staff duty. Beginning salary \$285 per month and \$10 shift differential, 40 hr. wk., 7 pd. holidays, yearly vacation, health insurance program. Uniform laundry provided. Mark Twain Hospital District, San Andreas, Calif.

REGISTERED NURSES: New 40 bed hospital, Texas vacation land, near large cities. Excellent salary and personnel policies—staff duty. Write Administrator, New Braunfels Hospital, Inc., New Braunfels, Texas.

REGISTERED NURSES: Positions for general duty registered nurses, starting salary \$250 per month. Positions also available for specially trained nurses in the following classifications: operating room, anesthetist, infectious and contagious, pediatrics, premature infant care, obstetrical and tuberculosis. Salary depending on qualifications. For all groups living in facilities available, average 44 hr. wk. 11 holidays per year, sick leave on indefinite accumulation basis, free hospitalization, one free meal while on duty, 8 hr. day, and laundry \$4 per month. Apply Superintendent, Lafayette Charity Hospital, Lafayette, La.

REGISTERED NURSES: Male and female. Starting salary \$300 up plus \$10 pm shifts. 40 hr wk. Social Security, paid vacation, 10 days sick leave, hospital group insurance. Apply Mr. Glenn A. Dickau, R.N., Administrator, Corning Memorial Hospital, Corning, Calif.

REGISTERED NURSES: Eligible for Calif. registration needed. 10 openings. General duty start 332, range to 415. Shift differential 15-25. Special categorized with salaries in accordance. Quarters provided. Vacations, 40 hr. wk., paid holidays, cumulative sick leave and health plan. Apply Director of Nursing, Humboldt County Community Hospital, 2200 Harrison St., Eureka, Calif.

REGISTERED NURSES: 140 bed Physical Medicine and Rehabilitation Hospital, fully accredited by JCAH, accepting patients with

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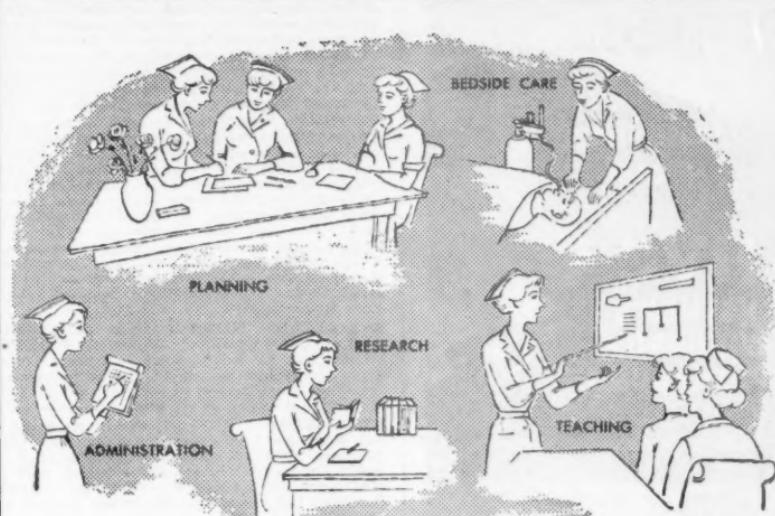
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physical handicaps. Begin at \$280 monthly with differential for evening and night duty. Quarters and meals available for \$35 monthly. Uniforms laundered. Completely air-conditioned hospital well located in relation to San Antonio, Austin and Gulf Coast. Contact Director of Nursing, Gonzales Warm Springs Foundation, Gonzales, Tex.

REGISTERED NURSES: For Veterans Administration Hospital, Fort Howard, Maryland, located 15 mi from Baltimore. 427 bed GM&S Hospital. Personnel policies include 40 hr wk, 30 days annual leave, 15 days sick leave and 8 holidays. Salaries, Junior Grade \$4025. Associate Grade \$4730 with yearly increases. Non-housekeeping quarters available. Uniform allowances and laundry provided. Openings for both men and women interested. Contact Chief, Nursing Service, VAH, Fort Howard, Md.

REGISTERED NURSES FOR GENERAL DUTY, OBSTETRICAL, AND SURGICAL NURSING: 80 bed hospital. Six miles from down town Memphis. 40 hr. wk., other benefits. Contact Director of Nurses, Crittenton Memorial Hospital, West Memphis, Ark.

REGISTERED PROFESSIONAL NURSES: For supervisory, educational and general staff positions. Liberal personnel policies. 40 hr. week. Differential salary for evening, nights and operating room. Social Security. Christ Hospital, 176 Palisade Ave., Jersey City, N.J.

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STAFF NURSE POSITIONS AVAILABLE: 600 bed General and Tuberculosis Hospitals with student programs. In central valley city of 108,000. State and junior colleges afford opportunity for advanced education. Liberal personnel policies. Salary \$300 with 4 annual increases to \$341. Full maintenance available at \$45 monthly. Write to Associate Director of Nursing Service, Fresno County General Hospital, Fresno, Calif.

STAFF NURSES: 300 bed general hospital located in the Hollywood District of sunny California. Beginning salaries \$300-\$315 per mo, maximum \$330-\$355, 5 day wk, 6 holidays, pd vacation and sick leave. For further information write Director Nursing Service, Hollywood Presbyterian Hospital, Los Angeles 27, Calif.

STAFF NURSES: For Tuberculosis Hospital, located about 20 miles from New York City. 5 day 40 hr. wk. Beginning salary \$323 yearly with a yearly increment \$199 to \$4180. Differential of \$360 for evening duty, and \$240 for night duty. Full maintenance available at \$624 yearly. Liberal vacation, holidays, sick time, Pension Plan, or Social Security available, depending upon age, physical condition and other determining factors. Apply to Director of Nurses, Essex County Sanatorium, Verona, N.J.

STAFF NURSES: For 150 bed modern fully approved general hospital located in the "Fruitbowl of the Nation". Starting salary \$260 up, 8 merit increases, 40 hr wk, differential for afternoon and night duty. Apply Director of Nurses, Yakima Valley Memorial Hospital, Yakima, Wash.

STAFF NURSES: For 225 bed Southern California hospital on coast. Attractive personnel policies including 40 hr wk. Salary for California registered nurses starts at \$265 and increases on merit rating. Apply Director of Nursing, Santa Barbara Cottage Hospital, Santa Barbara, Calif.

STAFF NURSES: For 45 bed general hospital, completely remodeled and new equipment. 44 hr. week. Starting salary \$265 up. Good working conditions. Liberal personnel policy. Apply Administrator, Coon Memorial Hospital, Dalhart, Tex.

STAFF NURSES: For modern 650 bed tuberculosis hosp, affiliated with Western Reserve University and approved by joint commission on accreditation of hospitals. 40 hr wk, 5 day week. Salary \$293 to \$323, with automatic increases. Full maintenance available at minimum rate. Housing for two or more nurses. Advancement for eligible applicants. Meets approved minimum employment standards of the State Nurses' Association. Apply to Director of Nursing, Sunny Acres Hospital, Cleveland 22, Ohio.

STUDENT HEALTH: (a) Infirmary Nurse, old South renowned Women's College, city of 25,000, exc. liv. accom, opport., further educ. RN 12-8 Burneice Larson, Medical Bureau, 900 N Michigan Ave., Chicago, Ill.

SUPERVISORS: (a) In-Service trng, 130 bed hosp, set up program. \$350, mtce. S. (b) Communicable Disease, OB, air-conditioned [Please turn to page 94]



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(Signed) William L. Chapman, Jr.
Sworn to and subscribed before me this 26th day of October, 1956.

(Seal) Rose Margetts,
Notary Public, State of New Jersey,
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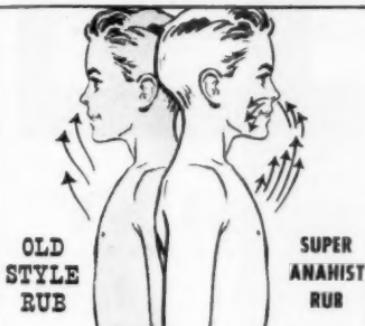
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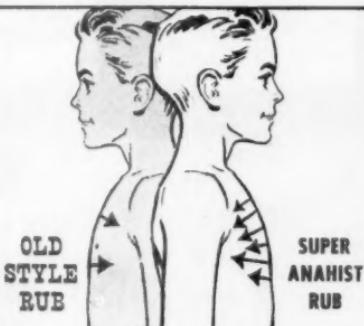
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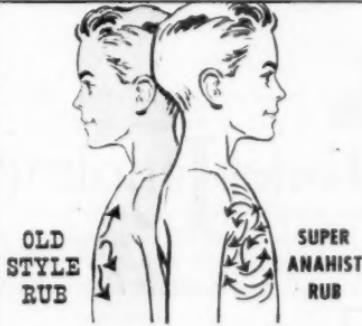
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